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Child Care and Development Fund (CCDF) Plan

for

State/Territory Idaho

FFY 2019–2021

This Plan describes the Child Care and Development Fund program to be administered by the State or Territory for the period from 10/1/2018 to 9/30/2021, as provided for in the applicable statutes and regulations. The Lead Agency has the flexibility to modify this program at any time, including amending the options selected or described.

For purposes of simplicity and clarity, the specific provisions of applicable laws printed herein are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text. The Lead Agency acknowledges its responsibility to adhere to the applicable laws regardless of these modifications.

Table of Contents

Introduction and How to Approach Plan Development	1
1 Define CCDF Leadership and Coordination with Relevant Systems.....	3
1.1 CCDF Leadership	3
1.2 CCDF Policy Decision Authority	4
1.3 Consultation in the Development of the CCDF Plan.....	8
1.4 Coordination with Partners to Expand Accessibility and Continuity of Care	11
1.5 Optional Use of Combined Funds, CCDF Matching and Maintenance-of-Effort Funds	16
1.6 Public-Private Partnerships	19
1.7 Coordination with Local or Regional Child Care Resource and Referral Systems	19
1.8 Disaster Preparedness and Response Plan.....	23
2 Promote Family Engagement through Outreach and Consumer Education.....	26
2.1 Outreach to Families with Limited English Proficiency and Persons with Disabilities	26
2.2 Parental Complaint Process.....	28
2.3 Consumer Education Website	30
2.4 Additional Consumer and Provider Education	37
2.5 Procedures for Providing Information on Developmental Screenings.....	41
2.6 Consumer Statement for Parents Receiving CCDF Funds	42
3 Provide Stable Child Care Financial Assistance to Families.....	43
3.1 Eligible Children and Families	44
3.2 Increasing Access for Vulnerable Children and Families	55
3.3 Protection for Working Families.....	58
3.4 Family Contribution to Payments.....	64
4 Ensure Equal Access to Child Care for Low-Income Children	67
4.1 Parental Choice in Relation to Certificates, Grants, or Contracts	67
4.2 Assessing Market Rates and Child Care Costs	71
4.3 Setting Payment Rates.....	75
4.4 Summary of Facts Used to Determine That Payment Rates Are Sufficient to Ensure Equal Access	77
4.5 Payment Practices and the Timeliness of Payments	80
4.6 Supply-Building Strategies to Meet the Needs of Certain Populations.....	83
5 Establish Standards and Monitoring Processes to Ensure the Health and Safety of Child Care Settings	86
5.1 Licensing Requirements.....	86
5.2 Health and Safety Standards and Requirements for CCDF Providers	88
5.3 Monitoring and Enforcement Policies and Practices for CCDF Providers	121
5.4 Criminal Background Checks	129
6 Recruit and Retain a Qualified and Effective Child Care Workforce	169
6.1 Professional Development Framework	169
6.2 Training and Professional Development Requirements.....	173
6.3 Early Learning and Developmental Guidelines.....	176

7	Support Continuous Quality Improvement.....	178
7.1	Quality Activities Needs Assessment for Child Care Services.....	179
7.2	Use of Quality Funds.....	180
7.3	Supporting Training and Professional Development of the Child Care Workforce with CCDF Quality Funds	181
7.4	Quality Rating and Improvement System (QRIS).....	185
7.5	Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers	188
7.6	Child Care Resource and Referral	190
7.7	Facilitating Compliance with State Standards	190
7.8	Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services	191
7.9	Accreditation Support	192
7.10	Program Standards	193
7.11	Early Learning and Development Guidelines and Other Quality Improvement Activities	194
8	Ensure Grantee Program Integrity and Accountability	194
8.1	Internal Controls and Accountability Measures to Help Ensure Program Integrity	195
	Appendix A: Background Check Waiver Request Form	205

Introduction and How to Approach Plan Development

The Child Care and Development Fund (CCDF) program provides resources to state, territory, and tribal grantees that enable low-income parents to work or pursue education and training so that they can better support their families while at the same time promoting the learning and development of their children. The CCDF program also provides funding to enhance the quality of child care for all children. On November 19, 2014, the Child Care and Development Block Grant (CCDBG) Act of 2014 was signed into law (Pub. L. 113-186). The law reauthorizes and significantly revises the purposes of the CCDF program and requirements for state and territory grantees. In September 2016, the [Final Rule](#) was released. The [Final Rule](#) makes regulatory changes to the CCDF program based on the CCDBG Act of 2014. These changes strengthen requirements to protect the health and safety of children in child care; help parents make informed consumer choices and access information to support child development; provide equal access to stable, child care for low-income children; and enhance the quality of child care and the early childhood workforce.

The Plan is the primary mechanism that the Administration for Children and Families (ACF) uses to determine state and territory compliance with the requirements of the law and rule. The Preprint provides a tool for states and territories to describe to ACF their progress on the following sections:

1. Define CCDF Leadership and Coordination With Relevant Systems
2. Promote Family Engagement Through Outreach and Consumer Education
3. Provide Stable Child Care Financial Assistance to Families
4. Ensure Equal Access to Child Care for Low-Income Families
5. Establish Standards and Monitoring Processes To Ensure the Health and Safety of Child Care Settings
6. Recruit and Retain a Qualified and Effective Child Care Workforce
7. Support Continuous Quality Improvement
8. Ensure Grantee Accountability

These organizational categories reflect key functions of an integrated system of child care for low-income working families. Although the Plan is divided into sections for reporting and accountability purposes, ACF encourages Lead Agencies to approach the Plan in a cross-cutting, integrated manner. The intention is that grantees and the federal government will be able to use this information to track and assess progress, determine the need for technical assistance (TA), and determine compliance with specific requirements and deadlines.

Instructions:

CCDF Plan Response Options for Areas Where Implementation Is Still in Progress

As indicated in the Preamble to the CCDF Final Rule (81 FR, p. 67443–4), States must demonstrate compliance with all requirements of the Final Rule no later than October 1, 2018 (the effective date of the FY 2019-2021 CCDF Plan). The only exception is background check requirements, for which States may request time-limited waiver extensions. As such, this

Preprint was developed with the expectation that all requirements, with the exception of background check requirements, would be fully implemented no later than October 1, 2018.

Note that for any changes to the CCDF program effective prior to September 30, 2018, Lead Agencies will be required to submit Plan amendments to the FY 2016-2018 CCDF Plans.

ACF recognizes that Lead Agencies may still be working on implementing some requirements of the Final Rule in order to meet this deadline and may have pending actions (such as legislation or administrative rules) to be implemented at the time of Plan submission. To facilitate responses in these areas, Lead Agencies should use associated “Describe” boxes to provide up-to-date information on the status for these requirements at the time of Plan submission. In the description of the CCDF requirements, ACF requests that the Lead Agency specify what components are implemented (if any) and identify what components are still pending. For pending components, Lead Agencies should list any major pending actions (passage of legislation, approval of administrative rules, etc.) needed to complete implementation and expected completion date. Lead Agencies may update these descriptions prior to Plan approval by the end of September, as appropriate, or submit a Plan Amendment pursuant to the requirements at 98.18(b) after the Plan becomes effective on October 1, 2018.

Please note that all requirements not fully implemented by the Final Rule deadline are subject to compliance actions, such as corrective action plans and/or penalties in accordance with CCDF regulations.

Citations

ACF recognizes that Lead Agencies use different mechanisms to establish policies, such as state statute, regulations, administrative rules, or policy manuals or policy issuances. When asked to provide a citation in the CCDF Plan, Lead Agencies should list the citation(s) for the policy that clearly identifies and establishes the requirement and that allows the Lead Agency to enforce the requirement. Lead Agencies may list multiple sources as needed to cover all types of providers receiving CCDF (e.g., policies for licensed providers may be established in licensing regulations and policies for license-exempt providers may be in subsidy rules).

CCDF Plan Submission

States and territories will submit their Plans electronically through the ACF-118 electronic submission site. The ACF-118 site will include all language and questions included in the final CCDF Plan Preprint template approved by the Office of Management and Budget. Please note that the format of the questions on the ACF-118 site could be modified from the Word version of the document to ensure compliance with Section 508 policies regarding accessibility to electronic and information technology for individuals with disabilities. (See <http://www.section508.gov/> for more information.)

In responding to questions, states and territories are asked to provide brief, specific summaries and/or bullet points only with specific language that responds to the question. Do not use tables or copy and paste charts, add attachments, or paste manuals into the Plan. All information and materials developed to support CCDF implementation and information reported in the CCDF Plan are subject to review by ACF as part of ongoing oversight and monitoring efforts.

1 Define CCDF Leadership and Coordination with Relevant Systems

This section identifies the leadership for the CCDF program in each Lead Agency and the entities and individuals who will participate in the implementation of the program. It also identifies the stakeholders that were consulted to develop the Plan and who the Lead Agency collaborates with to implement services. In this section respondents are asked to identify how match and maintenance-of-effort (MOE) funds are identified. **Lead Agencies explain their** coordination with child care resource and referral (CCR&R) systems, and outline the work they have done on their disaster preparedness and response plans.

1.1 CCDF Leadership

The Governor of a state or territory must designate an agency (which may be an appropriate collaborative agency) or establish a joint interagency office to represent the state or territory as the Lead Agency. The Lead Agency agrees to administer the program in accordance with applicable federal laws and regulations and the provisions of this Plan, including the assurances and certifications appended hereto (658D; 658E(c)(1)). **Note: An amendment to the CCDF State Plan is required if the Lead Agency changes or if the Lead Agency official changes.**

1.1.1 Which Lead Agency is designated to administer the CCDF program?

Identify the Lead Agency or joint interagency office designated by the state or territory. ACF will send official grant correspondence, such as grant awards, grant adjustments, Plan approvals, and disallowance notifications, to the designated contact identified here (658D(a)).

a) Lead Agency or Joint Interagency Office Information:

Name of Lead Agency: **Idaho Department of Health and Welfare**

Street Address: **450 West State Street**

City: **Boise**

State: **Idaho**

ZIP Code: **83720**

Web Address for Lead Agency: **www.healthandwelfare.idaho.gov**

b) Lead Agency or Joint Interagency Official Contact Information:

Lead Agency Official First Name: **Ericka**

Lead Agency Official Last Name: **Rupp**

Title: **Program Manager**

Phone Number: **208-334-5641**

Email Address: **Ericka.Rupp@dhw.idaho.gov**

1.1.2 Who is the CCDF Administrator?

Identify the CCDF Administrator designated by the Lead Agency, the day-to-day contact, or the person with responsibility for administering the state's or territory's CCDF program. ACF will

send programmatic communications, such as program announcements, program instructions, and data collection instructions, to the designated contact identified here. If there is more than one designated contact with equal or shared responsibility for administering the CCDF program, please identify the Co-Administrator or the person with administrative responsibilities and include his or her contact information.

a) CCDF Administrator Contact Information:

CCDF Administrator First Name: **Ericka**

CCDF Administrator Last Name: **Rupp**

Title of the CCDF Administrator: **Program Manager**

Phone Number: **208-334-5641**

Email Address: **Ericka.Rupp@dhw.idaho.gov**

Address for the CCDF Administrator (if different from the Lead Agency):

Street Address:

City:

State:

ZIP Code:

b) CCDF Co-Administrator Contact Information (if applicable):

CCDF Co-Administrator First Name:

CCDF Co-Administrator Last Name:

Title of the CCDF Co-Administrator:

Description of the role of the Co-Administrator:

Phone Number:

Email Address:

Address of the CCDF Co-Administrator (if different from the Lead Agency):

Street Address:

City:

State:

ZIP Code:

1.2 CCDF Policy Decision Authority

The Lead Agency has broad authority to administer (i.e., establish rules) and operate (i.e., implement activities) the CCDF program through other governmental, non-governmental, or public or private local agencies as long as it retains overall responsibility for the administration of the program (658D(b)). Administrative and implementation responsibilities undertaken by agencies other than the Lead Agency must be governed by written agreements that specify the

mutual roles and responsibilities of the Lead Agency and other agencies in meeting the program requirements.

1.2.1 Which of the following CCDF program rules and policies are administered (i.e., set or established) at the state or territory level or local level? Identify whether CCDF program rules and policies are established by the state or territory (even if operated locally) or whether the CCDF policies or rules are established by local entities, such as counties or workforce boards (98.16(i)(3)). Check one.

- ☒ All program rules and policies are set or established at the state or territory level. If checked, skip to question 1.2.2.
- ☐ Some or all program rules and policies are set or established by local entities. If checked, indicate which entities establish the following policies. Check all that apply.
1. Eligibility rules and policies (e.g., income limits) are set by the:
 - ☐ State or territory
 - ☐ Local entity (e.g., counties, workforce boards, early learning coalitions). If checked, identify the entity and describe the type of eligibility policies the local entity(ies) can set. _____
 - ☐ Other. Describe: _____
 2. Sliding-fee scale is set by the:
 - ☐ State or territory
 - ☐ Local entity (e.g., counties, workforce boards, early learning coalitions). If checked, identify the entity and describe the type of eligibility policies the local entity(ies) can set.
 - ☐ Other. Describe:
 3. Payment rates are set by the:
 - ☐ State or territory
 - ☐ Local entity (e.g., counties, workforce boards, early learning coalitions). If checked, identify the entity and describe the type of eligibility policies the local entity(ies) can set.
 - ☐ Other. Describe:
 4. Other. List and describe other program rules and policies (e.g., quality rating and improvement systems [QRIS], payment practices):

1.2.2 How is the CCDF program operated? In other words, which entity(ies) implement or perform these CCDF services? Check all that apply.

a) Who conducts eligibility determinations?

- ☒ CCDF Lead Agency
- ☐ Temporary Assistance for Needy Families (TANF) agency
- ☐ Other state or territory agency
- ☐ Local government agencies, such as county welfare or social services departments
- ☐ Child care resource and referral agencies
- ☐ Community-based organizations
- ☐ Other.

b) Who assists parents in locating child care (consumer education)?

- ☐ CCDF Lead Agency
- ☐ TANF agency
- ☐ Other state or territory agency
- ☐ Local government agencies, such as county welfare or social services departments
- ☒ Child care resource and referral agencies
- ☐ Community-based organizations
- ☐ Other.

c) Who issues payments?

- ☒ CCDF Lead Agency
- ☐ TANF agency
- ☐ Other state or territory agency.
- ☐ Local government agencies, such as county welfare or social services departments.
- ☐ Child care resource and referral agencies.
- ☐ Community-based organizations.
- ☐ Other.

1.2.3 Describe the processes the Lead Agency uses to monitor CCDF administration and implementation responsibilities performed by other agencies as reported above in 1.2.2, including written agreements, monitoring and auditing procedures, and indicators or measures to assess performance of those agencies (98.16(b)). Note: The contents of the written agreement may vary based on the role the agency is asked to assume or type of project, but must include at a minimum, tasks to be performed, schedule for completing tasks, budget which itemizes categorical expenditures in accordance with CCDF requirements, and indicators or measures to assess performance (98.11(a)(3)).

CCR&R services are provided statewide through a contract with one entity (University of Idaho) which employs staff and/or contracts with other agencies to carry out the CCR&R scope of work. The Scope of Work for CCR&R offices includes: Parents are provided a full range of child care options upon contact (through 211) by the CCR&R Resource Specialists. Parents may also access information on quality child care and child care options in their locale on the IdahoSTARS website. CCR&R Resource Specialists provide parents information on child care options to meet the specific needs of the family. Parents are supported in determining their priorities in selecting the best child care setting for their child. Data on the coordination of services and supports, including numbers of children receiving Early Intervention/Early Childhood Special Education services, is collected on CCR&R Site Visit Report forms, documented in the NDS database, and reported on the Monthly Monitor Report. Supply and

demand data for child care services in local areas/regions is collected by CCR&R Resource Specialists during the referral process, documented in the NDS database and recorded on the Monthly Monitor Report. CCR&R staff engages in collaboration and partnerships with public and private community agencies, councils, faith and community-based child care providers to increase the supply and quality of child care services in Idaho. CCR&R staff disseminates information on quality child care during family-centered community events, and participate in regional communities as members of local committees and councils to increase the quality and supply of child care services in every region. IdahoSTARS administrators and CCR&R staff coordinate activities with our Lead Agency through consistent dissemination of information, conferencing, and coordinated activities in all regions of the state.

- 1.2.4 Lead Agencies must assure that, to the extent practicable and appropriate, any code or software for child care information systems or information technology for which a Lead Agency or other agency expends CCDF funds to develop must be made available on request to other public agencies, including public agencies in other States, for their use in administering child care or related programs (98.15(a)(11)). Assure by describing how the Lead Agency makes child care information systems available to public agencies in other states to the extent practicable and appropriate. Idaho ensures that child care information systems are made available upon request from other public agencies in other states by having standard processes within the Department of Health and Welfare for how to contact, engage, and request information pertaining to systems. IDHW has clearly defined divisions and teams with whom work on and maintain systems and these divisions are also responsible for connecting with and sharing, when appropriate, information with other states about the how and with what resources, the specific software or systems were built. Any and all contracts for Child Care in Idaho have specific language articulated in the contract pertaining to proprietary limitations of information built or developed with federal monies.
- 1.2.5 Lead Agencies must have in effect policies to govern the use and disclosure of confidential and personally identifiable information about children and families receiving CCDF assistance and child care providers receiving CCDF funds (98.15(b)(13)). Certify by describing the Lead Agency's policies related to the use and disclosure of confidential and personally identifiable information. All Self Reliance (SR) staff handle confidential customer information when completing their work on a daily basis. Confidential information must be handled appropriately and kept safe while performing job duties. SR staff, as it is referred to in this document, includes, but is not limited to, SR state employees, contractors, temporary workers, and anyone else conducting business on behalf of the SR Division. Purpose: This document provides standards for handling confidential customer information. Related Terminology: Personally Identifiable Information (PII): any information that can be used alone or in combination with other personal information to potentially identify a specific individual. PII includes information, such as first and last names, Date of Birth (DOB), and Social Security Number (SSN). Federal Tax Information (FTI): Information gathered directly from the Internal Revenue Service (IRS) which includes but is not limited to tax filer(s) name, address, SSN and Federal Tax Offset (FTO) information. Standards: SR staff only share minimal PII or FTI information with other Department employees and partners when performing normal business processes that require this information in order to provide benefits or services. Instead, SR staff share non-PII, such as IBES case numbers and Client Identification Numbers (CIN) whenever possible. Improper disclosure refers to when PII or FTI information is shared with individuals or agencies not authorized to receive the information —OR— when the information provided is

more than what was necessary to be disclosed. Images contained in e-mail, or images attached to the e-mail, cannot be automatically scanned for PII information so they require manual encryption before being sent see Sending Secure E-Mails to Recipients outside DHW for details. Not all SR programs utilize the same interface for FTI and Social Security Administration (SSA) information. Access to each interface is restricted by the user security level approved for his or her job duties as determined by the Federal Law. It is critical that all staff only obtain this information through the appropriate interface approved for his or her job duties or it could result in termination and/or criminal prosecution. In order to protect customer information when completing your daily work follow these precautions:

- Lock your computer anytime you leave your workstation. To lock your computer, press CTRL + ALT + DEL, then press ENTER – OR – press + L.
- Report unauthorized disclosure of PII, FTI, and SSA information your immediate supervisor. See Escalating Potential Privacy Incidents.
- When a conversation must take place involving confidential information where others may hear, conduct the conversation at an appropriate volume.
- Never print, e-mail, or fax information found on FTI or SSA interfaces.
- Do not share confidential information, including information found on interfaces with unauthorized individuals.
- Never journal or narrate the acronym “FTI”.

1.3 Consultation in the Development of the CCDF Plan

The Lead Agency is responsible for developing the CCDF Plan, which serves as the application for a 3-year implementation period. As part of the Plan development process, Lead Agencies must consult with the following:

- (1) Appropriate representatives of units of general purpose local government—(658D(b)(2); 98.10(c); 98.12(b); 98.14(b)). General purpose local governments are defined by the U.S. Census at https://www.census.gov/newsroom/cspan/govts/20120301_cspan_govts_def_3.pdf.
- (2) The State Advisory Council (SAC) on Early Childhood Education and Care (pursuant to 642B(b)(1)(A)(i) of the Head Start Act) (658E(c)(2)(R); 98.15(b)(1)) or similar coordinating body pursuant to 98.14(a)(1)(vii).
- (3) Indian tribe(s) or tribal organization(s) within the state. This consultation should be done in a timely manner and at the option of the Indian tribe(s) or tribal organization(s) (658D(b)(1)(E)).

Consultation involves meeting with or otherwise obtaining input from an appropriate agency in the development of the state or territory CCDF Plan. Describe the partners engaged to provide services under the CCDF program in question 1.4.1.

1.3.1 Describe the Lead Agency’s consultation in the development of the CCDF Plan.

- a) Describe how the Lead Agency consulted with appropriate representatives of general purpose local governments. **A copy of the CCDF plan was distributed to local municipalities that have their own child care licensing regulations to ensure an**

opportunity to provide feedback with regards to CCDF and its impact to providers in their communities.

- b) Describe how the Lead Agency consulted with the State Advisory Council or similar coordinating body. **A copy of the State Plan was provided to the States ICCP Advisory Council, Infant Toddler Advisory Council and Home Visiting Advisory Council to offer an opportunity to provide feedback on services provides through CCDF and alignment of partnership through our federal programs in serving families and children.**
- c) Describe, if applicable, how the Lead Agency consulted with Indian tribes(s) or tribal organizations(s) within the state. Note: The CCDF regulations recognize the need for States to conduct formal, structured consultation with Tribal governments, including Tribal leadership. Many States and Tribes have consultation policies and procedures in place. **The CCDF State Plan was sent to each tribal entity in Idaho for feedback as well as provided information on and date and time of the public comment period. A copy of the State Plan was also provided at the State's partner meeting with the tribes.**
- d) Describe any other entities, agencies, or organizations consulted on the development of the CCDF Plan. **A copy of the CCDF plan was provided to the State Department of Education McKinney-Vento Coordinator for an opportunity to provide feedback.**

1.3.2 Describe the statewide or territory-wide public hearing process held to provide the public with an opportunity to comment on the provision of child care services under this Plan (658D(b)(1)(C); 98.16(f)). *Reminder:* Lead Agencies are required to hold at least one public hearing in the state or territory, with sufficient statewide or territory-wide distribution of notice prior to such a hearing to enable the public to comment on the provision of child care services under the CCDF Plan. At a minimum, this description must include:

- a) Date of the public hearing. **Thursday, August 2nd, 2018 from 1:00pm-3:00pm**
Reminder: Must be no earlier than January 1, 2018, which is 9 months prior to the October 1, 2018, effective date of the Plan. If more than one public hearing was held, please enter one date (e.g. the date of the first hearing, the most recent hearing or any hearing date that demonstrates this requirement).
- b) Date of notice of public hearing (date for the notice of public hearing identified in (a)). **Notices were published in 7 statewide and local newspapers on July 9, 2018 and July 11, 2018.**
Reminder: Must be at least 20 calendar days prior to the date of the public hearing. If more than one public hearing was held, enter one date of notice (e.g. the date of the first notice, the most recent notice or any date of notice that demonstrates this requirement).
- c) How was the public notified about the public hearing? Please include specific website links if used to provide notice. **A Notice of public hearing was published in the in 7 statewide and local newspapers throughout Idaho, additionally social media was utilized to used to get the word out about the public comment period. A draft of the State Plan was published on the Department's public website. A link to the plan was distributed to various agencies and partners, ensuring they had all the background information as well as the draft State Plan. An email box was created for receiving feedback and comment as well as mail and fax options available up until the hearing day.**
<https://healthandwelfare.idaho.gov/Children/ChildCareAssistance/tabid/292/Default.aspx>

- d) Hearing site or method, including how geographic regions of the state or territory were addressed.

The public hearing was held at 450 West State Street, Boise Idaho 83720. A draft of the State Plan was published on the Department's public website. A link to the plan was distributed to various agencies and partners, ensuring they had all the background information as well as the draft State Plan. An email box was created for receiving feedback and comment as well as mail and fax options available up until the hearing day. During the hearing a toll-free call in number was made available ensuring access to the hearing statewide.

<https://healthandwelfare.idaho.gov/Children/ChildCareAssistance/tabid/292/Default.aspx>

- e) How the content of the Plan was made available to the public in advance of the public hearing. (e.g. the Plan was made available in other languages, in multiple formats, etc.)

A Notice of public hearing was published in the in 7 statewide and local newspapers throughout Idaho, additionally social media was utilized to used to get the word out about the public comment period. A draft of the State Plan was published on the Department's public website. A link to the plan was distributed to various agencies and partners, ensuring they had all the background information as well as the draft State Plan. An email box was created for receiving feedback and comment as well as mail and fax options available up until the hearing day.

- f) How was the information provided by the public taken into consideration regarding the provision of child care services under this Plan? **Idaho will take all comments and feedback into consideration when making final changes to the plan. All comments and feedback will be documented and archived to accompany the plan in program documentation.**

1.3.3 Lead Agencies are required to make the submitted and final Plan, any Plan amendments, and any approved requests for temporary relief (i.e., waivers) publicly available on a website (98.14(d)). Please note that a Lead Agency must submit Plan amendments within 60 days of a substantial change in the Lead Agency's program. (Additional information may be found at <https://www.acf.hhs.gov/occ/resource/pi-2009-01>.)

- a) Provide the website link to where the Plan, any Plan amendments, and/or waivers are available. Note: A Plan amendment is required if the website address where the Plan is posted is changed.

<https://healthandwelfare.idaho.gov/Children/ChildCareAssistance/tabid/292/Default.aspx>

- b) Describe any other strategies that the Lead Agency uses to make the CCDF Plan and Plan amendments available to the public (98.14(d)). Check all that apply and describe the strategies below, including any relevant website links as examples.

☒ Working with advisory committees. Describe: **The Idaho Child Care Program Advisory Panel contributed to the development of the State Plan by providing guidance and feedback on issues pertaining to policy, programming and implementation for the State Plan requirements. Members were also provided the link to share with others about the public comment period. The Idaho Child**

Care Program (ICCP) Advisory Panel will be updated on the status of the implementation plans at each quarterly meeting. A copy of the CCDF plan will be published on the ICCP webpage, and updated as amendments are made.

- ☒ Working with child care resource and referral agencies. Describe: **Child Care resource and referral offices (CCRCs) contributed to the development of certain sections within the State Plan as well as provided the link to share with providers pertaining to public comment period. Due to their ongoing participation with the implementation of the quality components of the plan, as well as their work to help keep providers educated about programmatic changes, CCRCs will be regularly updated on the status of the state plan.**
- ☐ Providing translation in other languages. Describe: _____
- ☒ Sharing through social media (e.g., Twitter, Facebook, Instagram, email). Describe: **The State of Idaho published notification of Public Comment Period on the IDHW blog as well as emailed providers notifying them of the link to make comments on the State Plan. Child care program staff will work with the Department staff in charge of public relations and external communication to educate clients and providers on programmatic changes due to progress in the implementation plans or amendments to the CCDF State Plan. Department staff may elect to utilize social media to share information with clients and providers. Additionally, IdahoSTARS maintains Facebook, Twitter, and Pinterest profiles that are frequently used to share information and resources with providers. Facebook:**
<https://www.facebook.com/IdahoSTARS-252266474799407/?fref=ts>
- ☒ Providing notification to stakeholders (e.g., provider groups, parent groups). Describe: **The draft CCDF State Plan was posted on the IDHW website and was shared with the Idaho Child Care Program Meeting in July 2018. Parents and child care providers are represented at these quarterly meetings. Ongoing updates regarding progress in implementation and fulfillment of the CCDF plan will be presented at each group, and a copy of the CCDF Plan will be maintained on the IDHW website and will be updated as need to include any plan amendments. Also, child care program staff will work with the Department staff in charge of public relations and external communication to educate families and providers on programmatic changes due to progress in the implementation plans or amendments to the CCDF State Plan. Communication strategies may include letters and emails to participating families and providers, information posted in local DHW offices, social media posts, provider trainings conducted by program staff and local Child Care Consultants, and updated brochures, applications, signage, and provider agreements.**
- ☐ Other. Describe: _____

1.4 Coordination with Partners to Expand Accessibility and Continuity of Care

Lead Agencies are required to describe how the state or territory will efficiently, and to the extent practicable, coordinate child care services supported by CCDF with programs operating at the federal, state/territory, and local levels for children in the programs listed below. This includes programs for the benefit of Indian children, infants and toddlers, children with disabilities, children experiencing homelessness, and children in foster care (98.14(a)(1)).

1.4.1 Describe how the Lead Agency coordinates the provision of child care services with the following programs to expand accessibility and continuity of care and to assist children enrolled in early childhood programs in receiving full-day services that meet the needs of working families (658E(c)(2)(O); 98.12(a); 98.14(a)).

This list includes agencies or programs required by law or rule, along with a list of optional partners that Lead Agencies potentially would coordinate with over the next 3 years to expand accessibility and continuity of care and to assist children enrolled in early childhood programs in receiving full-day services.

Include in the descriptions the goals of this coordination, such as:

- extending the day or year of services for families;
- smoothing transitions for children between programs or as they age into school;
- enhancing and aligning the quality of services for **infants and toddlers through school-age children**;
- linking comprehensive services to children in child care **or school-age** settings; or
- developing the supply of quality care for vulnerable populations **(as defined by the Lead Agency) in child care and out-of-school time settings**

Check the agencies or programs the Lead Agency will coordinate with and describe all that apply.

- ☒ (REQUIRED) Appropriate representatives of the general purpose local government, which can include counties, municipalities, or townships/towns. Describe the coordination goals and process: **The State of Idaho continues to coordinate services with each of the cities that administers their own child care licensing regulations (Boise, Kuna, Chubbuck, Pocatello, Hailey, Ponderay, Ammon, Idaho Falls, Jerome, Coeur d'Alene, Moscow, Lewiston and Filer). Additionally, the CCDF team works with local law enforcement agencies including city, county sheriffs, and the Idaho State Police with the goal of enhancing the quality of our state partnerships through strong communication and clear process for how child care is accessed and improved in Idaho.**
- ☒ (REQUIRED) State Advisory Council on Early Childhood Education and Care or similar coordinating body (pursuant to 642B(b)(1)(A)(i) of the Head Start Act). Describe the coordination goals and process: **Idaho's ICCP Advisory Panel serves as the State Council for both CCDF and HeadStart with the goal of improving the quality of child care by linking services for children when possible and aligning systems to enhance services.**
- ☒ **Check here** if the Lead Agency has official representation and a decision-making role in the State Advisory Council or similar coordinating body.

- ☒ (REQUIRED) Indian tribe(s) and/or tribal organization(s), at the option of individual tribes. Describe the coordination goals and process, including which tribe(s) was consulted: **The State will continue to partner with the Tribes in Idaho with the goal of coordination. The Department meets quarterly with all Tribes with the goal of ensuring communication is happening both ways around program information and policy changes. We also want to ensure the Tribes have active participation on the Idaho Child Care Advisory Council and are currently searching for new representation. We use both the Department wide meetings as well as the Child Care Advisory Panel meeting as avenue for sharing information, gathering feedback and providing opportunities for alignment where necessary.**
 - ☐ N/A—There are no Indian tribes and/or tribal organizations in the State.
- ☒ (REQUIRED) State/territory agency(ies) responsible for programs for children with special needs, including early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Part B, Section 619 for preschool). Describe the coordination goals and process: **The Lead Agency sits on the Infant Toddler Advisory Council with both Part C and 619 State Leads. The CCDF Administrator sits on the Infant Toddler Sub Committee for transitioning of children and coordinates efforts between programs with the goal of sharing information and developing plans for linking comprehensive services.**
- ☒ (REQUIRED) State/territory office/director for Head Start state collaboration. Describe the coordination goals and process: **The Head Start Collaboration Director sits on the Idaho Child Care Program Advisory Panel. The CCDF administrator and Head Start Collaboration Director meet regularly to discuss information between both programs, problem solve and develop long range plans for partnership. The CCDF Administrator worked in partnership with the Head Start Collaborative Director to develop both the CCDF and Head Start grant application with the focus on collaboration and alignment of activities to strengthen knowledge and understanding around CCDF and Head Start systems. Long term goals include: increase enrollment of Head Starts in Idaho's Steps to Quality program; alignment of HS and Subsidy as an increased effort to improve the standards around health and safety and staff qualifications of child care staff to better align with HeadStart.**
- ☒ (REQUIRED) State/territory agency responsible for public health, including the agency responsible for immunizations. Describe the coordination goals and process: **Quarterly meetings are held with the Health District State Lead, the CCDF program, Licensing, and 211 Careline with the goal of sharing information, changes, problem solving situations, and coordinating efforts for a more streamlined process for providers and families.** Click or tap here to enter text.
- ☒ (REQUIRED) State/territory agency responsible for employment services/workforce development. Describe the coordination goals and process: **The Lead Agency is a part of the State Workforce Development Council and represents both TANF and Child Care as a partner at the table. Child Care Assistance is currently provided to families**

participating in the work services program mandatory for cash assistance families and can also support families enrolled in workforce development programs and education programs combined with some kind of employment.

- ☒ (REQUIRED) State/territory agency responsible for public education, including prekindergarten (preK). Describe the coordination goals and process: **The Lead Agency is part of efforts to align and coordinate services where possible with both McKinney-Vento and 619, both programs within the Department of Education. Idaho does not have state funded Pre-K therefore the partnership with Department of Education pertains only to McKinney-Vento and 619.**
- ☒ (REQUIRED) State/territory agency responsible for child care licensing. Describe the coordination goals and process: **Idaho State Licensing is housed under the Child Care Program for which alignment of programming and services is a comprehensive aspect of the daily work to administer ICCP and all aspects of provider management.**
- ☒ (REQUIRED) State/territory agency responsible for the Child and Adult Care Food Program (CACFP) and other relevant nutrition programs. Describe the coordination goals and process: **The Lead Agency meets annually, or more as requested, with CACFP to educate and inform one another of updates to program rules to enhance and align the quality of services to children in child care settings.**
- ☒ (REQUIRED) McKinney-Vento state coordinators for homeless education and other agencies providing services for children experiencing homelessness and, to the extent practicable, local McKinney-Vento liaisons. Describe the coordination goals and process: **The CCDF Administrator and McKinney-Vento Coordinator sit on various state councils together as well as have a goal of coordinating meetings when mutually beneficial to share information and develop resources and tools that can assist not only statewide coordinators in the schools but also the community partners serving homeless families in local communities.**
- ☒ (REQUIRED) State/territory agency responsible for the Temporary Assistance for Needy Families program. Describe the coordination goals and process: **The Lead Agency is a part of the same State Department responsible for child welfare. Our goal is to coordinate meetings when necessary to share information and develop plans, according to a topic. Child Care Assistance is currently provided to families participating in the work services program mandatory for cash assistance families.**
- ☒ (REQUIRED) Agency responsible for Medicaid and the state Children's Health Insurance Program. Describe the coordination goals and process: **The Lead Agency is a part of the same State Department responsible for childrens health insurance. Our goal is to coordinate meetings when necessary to share information and develop plans, according to a topic.**
- ☒ (REQUIRED) State/territory agency responsible for mental health. Describe the coordination goals and process: **The Lead Agency is a part of the same State Department responsible for mental health. Our goal is to coordinate meetings when necessary to share information and develop plans, according to a topic.**

- ☒ (REQUIRED) Child care resource and referral agencies, child care consumer education organizations, and providers of early childhood education training and professional development. Describe the coordination goals and process: **Child Care Resource Center's (CCRC) are present in all seven regions of Idaho targeted at providing resources and education to both families and child care providers. Child Care Resource Center staff provides technical assistance and coaching to child care providers enrolled in the states QRIS system with the goal of improving the quality of care, expand accessibility and continuity of care, and assist children enrolled in early childhood programs to receive full-day services.**
- ☒ (REQUIRED) Statewide afterschool network or other coordinating entity for out-of-school time care (if applicable). Describe the coordination goals and process: **The CCDF Administrator sits on the Idaho Out of School Network Advisory Council as well as CCRC staff participate on statewide work groups targeted at professional development and alignment of indicators of quality for out of school programs with the goal of embedding the indicators into the Idaho Steps to Quality program.**
- ☒ (REQUIRED) Agency responsible for emergency management and response. Describe the coordination goals and process: **The Lead Agency is a part of the State's emergency management and response team. Our goal is to coordinate meetings with our Lead Agency Coordinator when necessary to share information and develop plans, according to a topic.**

The following are examples of optional partners a state might coordinate with to provide services. Check all that apply.

- ☒ State/territory/local agencies with Early Head Start – Child Care Partnership grants. Describe: **Early Head Start- Child Care Partnership grants support one program in Idaho, working to expand full day programming for Head Start Children in Eastern Idaho. CCDF is working in partnership with the Head Start to ensure coordination and access to CCDF services. Throughout the expansion of Early Head Start, child care policy staff has provided guidance and support to help program staff walk through and understand the eligibility process of getting families access to ICCP. We will be working in partnership with our Head Start office to continue education and knowledge building around the benefits of early head start – child care partnerships with the long term goal of increasing the number of partnerships if given the opportunity to expand in future years.**
- ☐ State/territory institutions for higher education, including community colleges. Describe:
- ☒ Other federal, state, local, and/or private agencies providing early childhood and school-age/youth-serving developmental services. Describe: **The CCDF Administrator sits on the statewide advisory panel for the Out of School Network. The goal is to increase the quality of programming and a continuity of care as families make progress through**

years with their children. We are striving to increase collaboration and coordination of shared resources to professionals in the field of early care and education.

- ☒ State/territory agency responsible for implementing the Maternal and Child Home Visitation programs grant. Describe: **The CCDF Administrator sits on the statewide advisory panel for the MICHV Program. The goal is to increase the number of children receiving early intervention programming and a continuity of care as families make progress through years with their children. We are striving to increase collaboration and coordination of shared resources to professionals in the field of early care and education.**
- ☐ Agency responsible for Early and Periodic Screening, Diagnostic, and Treatment Program. Describe:
- ☒ State/territory agency responsible for child welfare. Describe: **The Lead Agency is a part of the same State Department responsible for child welfare. Our goal is to coordinate meetings when necessary to share information and develop plans, according to a topic. Child Care partners specifically with Child Welfare in the area of determining eligibility for foster children in need of child care services. Specifically, children in state licensed foster homes have a streamlined eligibility process with a simplified application that does not count the foster parents' income when determining copays or eligibility for the foster child. This partnership is defined in an agreement and when processes or procedures change, both departments coordinate communication and training strategies.**
- ☐ State/territory liaison for military child care programs. Describe:
- ☐ Provider groups or associations. Describe:
- ☐ Parent groups or organizations. Describe:
- ☐ Other. Describe:

1.5 Optional Use of Combined Funds, CCDF Matching and Maintenance-of-Effort Funds

Optional Use of Combined Funds: States and territories have the option to combine CCDF funds with **any program identified as required in 1.4.1**. These programs include those operating at the federal, state, and local levels for children in preschool programs, tribal early childhood programs, and other early childhood programs, including those serving infants and toddlers with disabilities, children experiencing homelessness, and children in foster care (658E(c)(2)(O)(ii)). Combining funds could include blending multiple funding streams, pooling funds, or layering funds together from multiple funding streams to expand and/or enhance services **for infants, toddlers, preschoolers, and school-age children** and families to allow for the delivery of comprehensive quality care that meets the needs of children and families. For example, state/territory agencies may use multiple funding sources to offer grants or contracts to programs to deliver services; a state/territory may allow a county/local government to use coordinated funding streams; or policies may be in place that allow local programs to layer CCDF funds with additional funding sources to pay for full-day, full-year child care that meets Early Head Start/Head Start Program Performance Standards or state/territory prekindergarten requirements in addition to state/territory child care licensing requirements.

As a reminder, CCDF funds may be used in collaborative efforts with Head Start programs to provide comprehensive child care and development services for children who are eligible for both programs. In fact, the coordination and collaboration between Head Start and CCDF is strongly encouraged by sections 640(g)(1)(D) and (E); 640(h); 641(d)(2)(H)(v); and 642(e)(3) of the Head Start Act in the provision of full working day, full calendar year comprehensive services. To implement such collaborative programs, which share, for example, space, equipment, or materials, grantees may layer several funding streams so that seamless services are provided (Policy and Program Guidance for the Early Head Start – Child Care Partnerships: https://www.acf.hhs.gov/sites/default/files/occ/acf_im_ohs_15_03.pdf).

1.5.1 Does the Lead Agency choose to combine funding for CCDF services for any programs identified in 1.4.1 (98.14(a)(3))?

☐ No (If no, skip to question 1.5.2)

☒ Yes. If yes, describe at a minimum:

a) How you define “combine”

Idaho defines "combine" as using CCDF in combination with other allocated funding sources to serve eligible children.

b) Which funds you will combine

Idaho combines SSBG, TANF, and State General Funds, and at the local level programs may combine Head Start/Early Start with CCDF funds.

c) Your purpose and expected outcomes for combining funds, such as extending the day or year of services available (i.e., full-day, full-year programming for working families), smoothing transitions for children, enhancing and aligning quality of services, linking comprehensive services to children in child care or developing the supply of child care for vulnerable populations

The goals of combining the funds are increased coverage and access to child care assistance for low income families.

d) How you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level?

Funds are combined at the individual transaction level.

e) How are the funds tracked and method of oversight

Funds are tracked using State budget tracking which entails separate account funding codes per funding source. Each source is reviewed quarterly as well as during an annual legislative audit.

1.5.2 Which of the following funds does the Lead Agency intend to use to meet the CCDF matching and MOE requirements described in 98.55(e) and 98.55(h)? Check all that apply.

Note: The Lead Agency must check at least public and/or private funds as matching, even if preK funds also will be used.

Use of pre-K for Maintenance of Effort: The CCDF Final Rule clarifies that public pre-K funds may also serve as maintenance-of-effort funds as long as the state/territory can describe how it will coordinate pre-K and child care services to expand the availability of child care while using

public preK funds as no more than 20 percent of the state's or territory's maintenance of effort or 30 percent of its matching funds in a single fiscal year (FY) (98.55(h)). If expenditures for pre-K services are used to meet the maintenance-of-effort requirement, the state/territory must certify that it has not reduced its level of effort in full-day/full-year child care services (98.55(h)(1); 98.15(a)(6)).

Use of Private Funds for Match or Maintenance of Effort: Donated funds do not need to be under the administrative control of the Lead Agency to qualify as an expenditure for federal match. However, Lead Agencies do need to identify and designate in the state/territory Plan the donated funds given to public or private entities to implement the CCDF child care program (98.55(f)).

- ☐ N/A—The territory is not required to meet CCDF matching and MOE requirements
- ☐ Public funds are used to meet the CCDF matching fund requirement. Public funds may include any general revenue funds, county or other local public funds, state/territory-specific funds (tobacco tax, lottery), or any other public funds.
 - If checked, identify the source of funds:
 - If known, identify the estimated amount of public funds that the Lead Agency will receive: \$
- ☒ Private donated funds are used to meet the CCDF matching funds requirement. Only private funds received by the designated entities or by the Lead Agency may be counted for match purposes (98.53(f)).
 - If checked, are those funds:
 - ☐ donated directly to the State?
 - ☒ donated to a separate entity(ies) designated to receive private donated funds?
 - If checked, identify the name, address, contact, and type of entities designated to receive private donated funds: **Idaho Out of School Network: Boise Idaho: Anna Almerico, Director**
 - If known, identify the estimated amount of private donated funds that the Lead Agency will receive: \$ **Mott Foundation funds in total of \$225k over three years**
- ☐ State expenditures for pre-K programs are used to meet the CCDF matching funds requirement. If checked, provide the estimated percentage of the matching fund requirement that will be met with preK expenditures (not to exceed 30 percent):
 - If the percentage is more than 10 percent of the matching fund requirement, describe how the State will coordinate its preK and child care services:
 - If known, identify the estimated amount of preK funds that the Lead Agency will receive for the matching funds requirement: \$
 - Describe the Lead Agency efforts to ensure that preK programs meet the needs of working parents:
- ☐ State expenditures for preK programs are used to meet the CCDF maintenance-of-effort requirements. If checked,

- The Lead Agency assures that its level of effort in full-day/full-year child care services has not been reduced, pursuant to 98.55(h)(1) and 98.15(6).
☐ No
☐ Yes
- Describe the Lead Agency efforts to ensure that preK programs meet the needs of working parents:
- Estimated percentage of the MOE Fund requirement that will be met with preK expenditures (not to exceed 20 percent):
- If the percentage is more than 10 percent of the MOE requirement, describe how the State will coordinate its preK and child care services to expand the availability of child care:
- If known, identify the estimated amount of preK funds that the Lead Agency will receive for the MOE Fund requirement: \$

1.6 Public-Private Partnerships

Lead Agencies are required to describe how they encourage public-private partnerships among other public agencies, tribal organizations, private entities, faith-based organizations, businesses or organizations that promote business involvement, and/or community-based organizations to leverage existing service delivery (i.e., cooperative agreement among providers to pool resources to pay for shared fixed costs and operation) (658E(c)(2)(P)). ACF expects these types of partnerships to leverage public and private resources to further the goals of the CCDBG Act. Lead Agencies are required to demonstrate how they encourage public-private partnerships to leverage existing child care and early education service-delivery systems and to increase the supply and quality of child care services for children younger than age 13, for example, by implementing voluntary shared service alliance models (98.14(a)(4)).

- 1.6.1 Identify and describe the entities with which and the levels at which the state/territory is partnering (level—state/territory, county/local, and/or programs), the goals of the partnerships, the ways that partnerships are expected to leverage existing service-delivery systems, the method of partnering, and examples of activities that have resulted from these partnerships (98.16(d)(2)). Idaho is partnering with Jannus Inc and Idaho Out of School Network (ION) for youth in Idaho to ensure youth have access to high quality out of school time programs. The Idaho Child Care Program contributed to the match needed for Idaho to continue the Mott Foundation award. Idaho will be working toward building capacity for out of school programming through leadership, partnership and advocacy to ensure youth and families have access to high quality programming. Child Care leadership, in partnership with Maternal and Child Health will be joining other state partners to convene a planning session to review and analyze needs assessment data to collectively define strategies we, as programs, will agree to work towards improving outcomes for children and families in Idaho through child care settings. The Child Care Program is also developing a proposal to engage various other entities in possible matching fund agreements. These efforts will be in SFY2019.

1.7 Coordination with Local or Regional Child Care Resource and Referral Systems

Lead Agencies may use CCDF funds to establish or support a system of local or regional child care resource and referral (CCR&R) organizations that is coordinated, to the extent determined

by the state/territory, by a statewide public or private non-profit, community-based or regionally based, lead child care resource and referral organization (such as a statewide CCR&R network) (658E(c)(3)(B)(iii); 98.52).

- If Lead Agencies use CCDF funds for local CCR&R organizations, the local or regional CCR&R organizations supported by those funds must, at the direction of the Lead Agency, provide parents in the State with consumer education information concerning the full range of child care options (including faith-based and community-based child care providers), analyzed by provider, including child care provided during non-traditional hours and through emergency child care centers, in their area.
- To the extent practicable, work directly with families who receive assistance to offer the families support and assistance to make an informed decision about which child care providers they will use to ensure that the families are enrolling their children in the most appropriate child care setting that suits their needs and one that is of high quality (as determined by the Lead Agency).
- Collect data and provide information on the coordination of services and supports, including services under Part B, Section 619 and Part C of the Individuals with Disabilities Education Act;
- Collect data and provide information on the supply of and demand for child care services in areas of the state and submit the information to the State;
- Work to establish partnerships with public agencies and private entities, including faith-based and community-based child care providers, to increase the supply and quality of child care services in the state and, as appropriate, coordinate their activities with the activities of the state Lead Agency and local agencies that administer funds made available through CCDF (98.52(b)).

Nothing in the statute or rule prohibits States from using CCR&R agencies to conduct or provide additional services beyond those required by statute or rule.

Note: Use 1.7.1 to address if a state/territory funds a CCR&R organization, what services are provided and how it is structured and use section 7.6.1 to address the indicators of progress met by CCR&R organizations if they are funded by quality set-aside funds.

1.7.1 Does the Lead Agency fund local or regional CCR&R organizations?

- ☐ No. The state/territory does not fund a CCR&R organization(s) and has no plans to establish one.
- ☒ Yes. The state/territory funds a CCR&R organization(s). If yes, describe the following:
- a) What services are provided through the CCR&R organization? **Answered below.**
 - b) How are CCR&R services organized, include how many agencies, if there is a statewide network and if the system is coordinated?

CCR&R Services are provided statewide through a contract between the Department of Health and Welfare (DHW) and the University of Idaho (UI). UI employs staff and contracts with other agencies to complete the scope of work. There are seven regional CCR&R offices in Idaho, with office hours of 8:00 – 5:00, Monday through Friday. Phone contact is directed to regional offices through 211

the Idaho CareLine. CCR&R offices are staffed with a Lead Quality Child Care Consultant (QC); Quality Child Care Consultants (QC); Child Care Health Consultants (CCHC); and Resource Specialists (RS). An IdahoSTARS Assistant Director (AD) provides leadership, a shared vision, oversight, guidance, and direct support to the CCR&R staff. An Operations Manual contains policies to guide structure of the IdahoSTARS program, systems, and decisions. Process documents, based on policies, support the consistency of the work of the CCR&R staff.

The scope of work for CCR&R includes: Referrals for families seeking child care are directed to an RS by 211, the Idaho CareLine. Families may also elect to access referrals via the IdahoSTARS website. In addition to referrals, the website offers information about quality child care, licensing requirements, background checks, health inspections, training, and other requirements in place for child care programs and providers in Idaho. Resource Specialists are trained to engage parents with identifying priorities for their families and strive to support them in finding the best care possible. Enhanced referrals are offered for the following reasons:

- families who speak a language other than English
- families who have a child with a disability
- families who have a parent on active duty in the armed forces
- families who are experiencing homelessness
- families who have a child who has been asked to leave a childcare program
- families who are having difficulty in finding child care (for example: a family seeking care during non-traditional hours)

The goal of the Enhanced Referral is to provide a family with a choice of programs that have available slots for the age group needed, and that best match the family's priorities; as well as to support the program to successfully welcome the family. The CCR&R staff will continue program support as needed, to ensure program staff have the training, technical assistance and/or coaching they need to meet the needs of the family and to increase the likelihood of continuity of care.

Enhanced Referrals have a follow-up component with parents to learn whether care was found and to track data to guide program planning,

Data is collected in NACCRRAware to report the supply and demand of child care in local areas, documented on the Monthly Monitor Report, and shared upon request with child care providers and community members.

CCR&R staff welcome new child care programs in the Idaho Child Care Program (ICCP) through an In Office Orientation that is completed on an individual basis.

The orientation helps directors/owners with understanding the ICCP system and the responsibilities and requirements associated with participating in the program. RS present the orientation, provide a handbook, and assist the provider, as needed, to complete paperwork, create a user profile for the training database, demonstrate how to access the training calendar, register for a training, and access one's training log. The orientation and handbook includes information on business practices, setting up an environment, building relationships with parents, interacting with children, tips for providers about challenging behaviors; developmentally appropriate practices, health and safety information, and emergency preparedness. A copy of the YIKES planning guide and wall charts for each classroom is provided during the orientation and an offer for follow-up by a CCHC. Once the child care program has a vendor number and is open for business, the RS completes a site visit to answer questions, provide follow-up on business practices and requirements such as sign-in and out procedures, encourage the completion of required health and safety training, and to promote ongoing professional development by participation in the PDS Registry.

CCR&R QCs and CCHCs provide coaching and technical assistance as they work directly with child care program directors and classroom staff to increase understanding of quality practices and to support embedding newly learned ideas and the development of skills into everyday usage. These staff members use a coaching model in their efforts to support providers with increasing the quality of care. All child care providers are welcome to contact our CCR&R offices to talk with a QC or CCHC, schedule a site visit, access the Lending Library, or participate in professional development opportunities. Priority is given to programs caring for children participating in ICCP and also for those programs participating in our QRIS, Steps to Quality.

CCR&R offices offer a Lending Library that contains classroom materials and approved training lessons on DVD for check-out. RS complete Provider Information File (PIF) updates twice each year by contacting every program in their region to update information and to connect providers with opportunities available through IdahoSTARS and within their regional communities.

CCR&R staff have developed partnerships and collaborate with public and private community agencies, organizations, and councils, including faith-based child care programs to strengthen the message and vision of the importance of quality child care for all children and the need to increase the supply of quality child care. They disseminate information about quality child care to families, businesses, and community members while participating in community events that are family focused.

Based on survey results, CCR&R staff members are visible within their communities and recognized as having expertise in the field of early care and education. They promote and encourage ongoing professional development and are greatly appreciated by the child care practitioners (providers, directors, owners) for their efforts and their services to effect change and help programs increase quality so that children and families thrive.

1.8 Disaster Preparedness and Response Plan

Lead Agencies are required to establish a Statewide Child Care Disaster Plan (658E(c)(2)(U)). They must demonstrate how they will address the needs of children—including the need for safe child care, before, during, and after a state of emergency declared by the Governor or a major disaster or emergency (as defined by Section 102 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. 5122)—through a Statewide Disaster Plan that, for a State, is developed in collaboration with the State human services agency, the State emergency management agency, the State licensing agency, the State health department or public health department, local and State child care resource and referral agencies, and the State Advisory Council on Early Childhood Education and Care (designated or established pursuant to section 642B(b)(1)(A)(i) of the Head Start Act (42 U.S.C. 9837b(b)(1)(A)(i))) or similar coordinating body (98.16(aa)).

- 1.8.1 Describe how the Statewide Child Care Disaster Plan was developed in collaboration with the State human services agency, the State emergency management agency, the State licensing agency, the State health department or public health department, local and State child care resource and referral agencies, and the State Advisory Council on Early Childhood Education and Care or similar coordinating body: The Department of Health and Welfare's maintains a Continuity of Operations (COOP) Plan that is a comprehensive emergency action guide, an incident-time reference and checklist that is based on the Bureau of Homeland Security's COOP plan template and the Federal Emergency Management Agency (FEMA) Planning Guide. The plan is specifically designed for use by the Department of Health and Welfare (DHW). DHW will use this plan to continue critical business functions when reacting to any unplanned event that cannot be effectively addressed within the scope of normal business operations and resources. The COOP plan is applicable to all Department of Health and Welfare divisions, bureaus, units, institutions and personnel. This COOP plan describes the actions that will be taken to activate a viable COOP capability within 12 hours of an emergency event, and to sustain that capability for up to 30 days. This COOP plan can be activated during business and non-business hours, with or without warning. This COOP plan covers all facilities where the Department of Health and Welfare critical business processes are performed. This COOP plan supports the performance of critical business processes from alternate locations and also provides for continuity of management and decision-making, in the event that senior management or technical personnel are unavailable. This COOP plan has been distributed to senior managers within the Department of Health and Welfare. Initial training has been provided to the Department of Health and Welfare's personnel with identified responsibilities, and this COOP plan has been shared with the Idaho Bureau of Homeland Security. The COOP plan is maintained on the internal Sharepoint site, and is accessible to all staff members. While the COOP plan does not currently address the continuation of child care services, subsidies, or licensing in the event of a disaster ongoing collaboration will improve the plan to

specifically address child care's unique needs. Currently, IdahoSTARS currently provides technical assistance to child care programs on emergency preparedness using the Y.I.K.E.S. (Your Inventory for Keeping Everyone Safe) Planning Guide. Child care providers can also complete the IS-36 FEMA Multihazard Planning in Child Care training to receive 2 IdahoSTARS training hours. Follow-up technical assistance is offered by the IdahoSTARS Child Care Health Consultant (CCHC) Program staff.

- 1.8.2 Describe how the Statewide Disaster Plan includes the Lead Agency's guidelines for the continuation of child care subsidies and child care services, which may include the provision of emergency and temporary child care services during a disaster and temporary operating standards for child care after a disaster: The Department of Health and Welfare's maintains a Continuity of Operations (COOP) Plan that is a comprehensive emergency action guide, an incident-time reference and checklist that is based on the Bureau of Homeland Security's COOP plan template and the Federal Emergency Management Agency (FEMA) Planning Guide. The plan is specifically designed for use by the Department of Health and Welfare (DHW). DHW will use this plan to continue critical business functions when reacting to any unplanned event that cannot be effectively addressed within the scope of normal business operations and resources. The COOP plan is applicable to all Department of Health and Welfare divisions, bureaus, units, institutions and personnel. This COOP plan describes the actions that will be taken to activate a viable COOP capability within 12 hours of an emergency event, and to sustain that capability for up to 30 days. This COOP plan can be activated during business and non-business hours, with or without warning. This COOP plan covers all facilities where the Department of Health and Welfare critical business processes are performed. This COOP plan supports the performance of critical business processes from alternate locations and also provides for continuity of management and decision-making, in the event that senior management or technical personnel are unavailable. This COOP plan has been distributed to senior managers within the Department of Health and Welfare. Initial training has been provided to the Department of Health and Welfare's personnel with identified responsibilities, and this COOP plan has been shared with the Idaho Bureau of Homeland Security. The COOP plan is maintained on the internal Sharepoint site, and is accessible to all staff members. While the COOP plan does not currently address the continuation of child care services, subsidies, or licensing in the event of a disaster ongoing collaboration will improve the plan to specifically address child care's unique needs.
- 1.8.3 Describe Lead Agency procedures for the coordination of post-disaster recovery of child care services: This COOP plan covers all facilities where the Department of Health and Welfare critical business processes are performed. This COOP plan supports the performance of critical business processes from alternate locations and also provides for continuity of management and decision-making, in the event that senior management or technical personnel are unavailable. This COOP plan has been distributed to senior managers within the Department of Health and Welfare. Initial training has been provided to the Department of Health and Welfare's personnel with identified responsibilities, and this COOP plan has been shared with the Idaho Bureau of Homeland Security. The COOP plan is maintained on the internal Sharepoint site, and is accessible to all staff members. While the COOP plan does not currently address the continuation of child care services, subsidies, or licensing in the event of a disaster ongoing collaboration will improve the plan to specifically address child care's unique needs.

- 1.8.4 Describe how the Lead Agency ensures that providers who receive CCDF funds have the following procedures in place—evacuation; relocation; shelter-in-place; lockdown; communications with and reunification of families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions: On March 2, 2017 the following rules were added to the Idaho Administrative Code of Rules Governing the Idaho Child Care Program: 16.06.12.12: Disaster and Emergency Planning. Providers must have documented policies and procedures planning for emergencies resulting from a natural disaster, or man-caused event that include: a. Evacuation, relocation, shelter-in-place, and lock-down procedures, and procedures for communication and reunification with families, continuity of operations, and accommodation of infants and toddlers, children with disabilities, and children with chronic medical conditions. A provider's adherence to these requirements is monitored as part of their annual health and safety inspection. Providers may develop and document their own comprehensive disaster preparedness plan or use the materials in the updated Y.I.K.E.S. (Your Inventory for Keeping Everyone Safe) Planning Guide which addresses all required components of disaster and emergency preparedness for providers. Inspectors review the materials and the documentation to ensure completion and compliance. IdahoSTARS created electronic documents and posted materials to their website; conducted meetings with health districts to share updated Y.I.K.E.S. (Your Inventory for Keeping Everyone Safe) Planning Guide; trained Child Care Resource Center (CCRC) staff on updated Y.I.K.E.S.; and messaged child care providers with updates. Child Care Resource Center (CCRC) staff distributed materials related to the requirement and provided one-on-one as well as group target technical assistance for all providers related to this requirement. Additionally, Y.I.K.E.S. materials were made available to the Health Districts for distribution to providers who are found out of compliance during their inspection. IdahoSTARS currently provides technical assistance to child care programs on emergency preparedness using the Y.I.K.E.S. Child care providers must also complete the IS-36 FEMA Multihazard Planning in Child Care training to receive 2 IdahoSTARS training hours, and to meet the health and safety training requirements for all ICCP providers. Follow-up technical assistance is offered by the IdahoSTARS Child Care Health Consultant (CCHC) Program staff.
- 1.8.5 Describe how the Lead Agency ensures that providers who receive CCDF funds have the following procedures in place for child care staff and volunteers—emergency preparedness training and practice drills as required in 98.41(a)(1)(vii): On March 2, 2017 the following rules were added to the Idaho Administrative Code of Rules Governing the Idaho Child Care Program: 16.06.12.12: Disaster and Emergency Planning. Providers must have documented policies and procedures planning for emergencies resulting from a natural disaster, or man-caused event that include: b. Procedures for staff and volunteer emergency preparedness training and practice drills. A provider's adherence to these requirements is monitored as part of their annual health and safety inspection. Providers may develop and document their own comprehensive disaster preparedness plan or use the materials in the updated Y.I.K.E.S. (Your Inventory for Keeping Everyone Safe) Planning Guide which addresses all required components of disaster and emergency preparedness for providers. Inspectors review the materials and the documentation to ensure completion and compliance. IdahoSTARS created electronic documents and posted materials to their website; conducted meetings with health districts to share updated Y.I.K.E.S. (Your Inventory for Keeping Everyone Safe) Planning Guide; trained Child Care Resource Center (CCRC) staff on updated Y.I.K.E.S.; and messaged child care providers with updates. Child Care Resource Center (CCRC) staff distributed

materials related to the requirement and provided one-on-one as well as group target technical assistance for all providers related to this requirement. Additionally, Y.I.K.E.S. materials were made available to the Health Districts for distribution to providers who are found out of compliance during their inspection. IdahoSTARS currently provides technical assistance to child care programs on emergency preparedness using the Y.I.K.E.S. Child care providers must also complete the IS-36 FEMA Multihazard Planning in Child Care training to receive 2 IdahoSTARS training hours, and to meet the health and safety training requirements for all ICCP providers. Follow-up technical assistance is offered by the IdahoSTARS Child Care Health Consultant (CCHC) Program staff.

- 1.8.6** Provide the link to the website where the statewide child care disaster plan is available: No website for a statewide child care disaster plan is currently available. Upon completion the plan will be posted on the Idaho Child Care Program page on the DHW website. Currently providers may access the Y.I.K.E.S. plan here:
<https://idahostars.org/portals/61/Docs/Providers/CCHC/YikesPlanGuide.pdf>

2 Promote Family Engagement through Outreach and Consumer Education

Lead Agencies are required to support the role of parents as child care consumers who need information to make informed choices regarding the services that best suit their needs. A key purpose of the CCDBG Act is to “promote involvement by parents and family members in the development of their children in child care settings” (658A(b)). Lead Agencies have the opportunity to consider how information can be provided to parents through the child care assistance system, partner agencies, and child care consumer education websites.

The target audience for the consumer education information includes three groups: parents receiving CCDF assistance, the general public, and when appropriate, child care providers. In this section, Lead Agencies will address how information is made available to families to assist them in accessing high-quality child care and how information is shared on other financial assistance programs or supports for which a family might be eligible. In addition, Lead Agencies will certify that information on developmental screenings is provided and will describe how research and best practices concerning children’s development, including their social-emotional development, is shared.

In this section, Lead Agencies will delineate the consumer and provider education information related to child care, as well as other services, including developmental screenings, which is made available to parents, providers, and the general public and the ways that it is made available. This section also covers the parental complaint process and the consumer education website that has been developed by the Lead Agency. Finally, this section addresses the consumer statement that is provided to parents supported with CCDF funds.

2.1 Outreach to Families with Limited English Proficiency and Persons with Disabilities

The Lead Agency is required to describe how it provides outreach and services to eligible families with limited English proficiency and persons with disabilities and to facilitate the participation of child care providers with limited English proficiency and disabilities in the CCDF program (98.16(dd)). Lead Agencies are required to develop policies and procedures to clearly

communicate program information, such as requirements, consumer education information, and eligibility information, to families and child care providers of all backgrounds (81 FR 67456).

2.1.1 Check the strategies the Lead Agency or partners utilize to provide outreach and services to eligible families for whom English is not their first language. Check all that apply.

- ☒ Application in other languages (application document, brochures, provider notices)
- ☒ Informational materials in non-English languages
- ☒ Website in non-English languages
- ☒ Lead Agency accepts applications at local community-based locations
- ☒ Bilingual caseworkers or translators available
- ☒ Bilingual outreach workers
- ☒ Partnerships with community-based organizations
- ☐ Other. Describe: _____

2.1.2 Check the strategies the Lead Agency or partners utilize to provide outreach and services to eligible families with a person(s) with a disability. Check all that apply.

- ☒ Applications and public informational materials available in Braille and other communication formats for access by individuals with disabilities
- ☐ Websites that are accessible (e.g., Section 508 of the Rehabilitation Act)
- ☐ Caseworkers with specialized training/experience in working with individuals with disabilities
- ☐ Ensuring accessibility of environments and activities for all children
- ☒ Partnerships with state and local programs and associations focused on disability-related topics and issues
- ☒ Partnerships with parent associations, support groups, and parent-to-parent support groups, including the Individuals with Disabilities Education Act (IDEA) federally funded Parent Training and Information Centers
- ☒ Partnerships with state and local IDEA Part B, Section 619 and Part C providers and agencies
- ☐ Availability and/or access to specialized services (e.g., mental health, behavioral specialists, therapists) to address the needs of all children
- ☐ Other. Describe: _____

2.2 Parental Complaint Process

The Lead Agency must certify that the state/territory maintains a record of substantiated parental complaints and makes information regarding such complaints available to the public on request (658E(c)(2)(C); 98.15(b)(3)). Lead Agencies must also provide a detailed description of the hotline or similar reporting process for parents to submit complaints about child care providers; the process for substantiating complaints; the manner in which the Lead Agency maintains a record of substantiated parental complaints; and ways that the Lead Agency makes information on such parental complaints available to the public on request (98.16; 98.32).

- 2.2.1 Describe the Lead Agency's hotline or similar reporting process through which parents can submit complaints about child care providers, including a link if it is a Web-based process: Parents, families, and concerned community members can submit child care complaints via email (careline@dhw.idaho.gov), fax (208-334-5531), or telephone by contacting 2-1-1 (1-800-926-2588) the Idaho CareLine. An online complaint form is available at this web address: <http://healthandwelfare.idaho.gov/Children/ChildCareAssistance/DaycareLicensing/FileaComplaint.aspx>
- 2.2.2 Describe the Lead Agency's process and timeline for screening, substantiating and responding to complaints regarding CCDF providers, including whether the process includes monitoring: The complaint process is the same for all child care providers in Idaho. Parents, families, and concerned community members can submit child care complaints via email (careline@dhw.idaho.gov), fax (208-334-5531), or telephone by contacting 2-1-1 (1-800-926-2588) the Idaho CareLine. Once received the complaints are entered into a single database called the Idaho Child Care Incident Tracker. Every complaint is reviewed by the State Child Care Program Specialist or the State Daycare Licensing Specialist to determine the correct resources, and agencies for referral. Complaints involving health and safety violations, the operation of a facility without a required license, ratio/supervision violations may all result in an unannounced health and safety inspection. Complaints related to business practices, professionalism, billing, toilet training, meals, and activities are referred to voluntary consultation through the Child Care Resource Center. Allegations of fraud are forwarded to an DHW auditor that specializes in the review of child care facilities. Any complaint alleging any type of abuse is immediately shared with all local law enforcement agencies for investigation. Complainants that allege imminent danger to a child care are encouraged to contact law enforcement. The Department will investigate complaints regarding child care. The investigation may include further contact with the complainant, scheduled or unannounced visits to the child care facility, collateral contacts including interviews with the victim, parents or guardian, administrators, operators, staff, consultants, children in care, other persons who may have knowledge of the complaint, and inspections by fire, health, or law enforcement officials. After an investigation, if it is determined by the relevant authorities that an incident occurred, it is considered "substantiated" and a summary of the incident and its possible resolution is published on IdahoChildCareCheck.org.
- 2.2.3 Describe the Lead Agency's process and timeline for screening, substantiating and responding to complaints for non-CCDF providers, including whether the process includes monitoring: The complaint process is the same for all child care providers in Idaho. Parents, families, and concerned community members can submit child care complaints via email (careline@dhw.idaho.gov), fax (208-334-5531), or telephone by contacting 2-1-1 (1-800-926-

2588) the Idaho CareLine. Once received the complaints are entered into a single database called the Idaho Child Care Incident Tracker. Every complaint is reviewed by the State Child Care Program Specialist or the State Daycare Licensing Specialist to determine the correct resources, and agencies for referral. Complaints involving health and safety violations, the operation of a facility without a required license, ratio/supervision violations may all result in an unannounced health and safety inspection. Complaints related to business practices, professionalism, billing, toilet training, meals, and activities are referred to voluntary consultation through the Child Care Resource Center. Allegations of fraud are forwarded to an DHW auditor that specializes in the review of child care facilities. Any complaint alleging any type of abuse is immediately shared with all local law enforcement agencies for investigation. Complainants that allege imminent danger to a child are encouraged to contact law enforcement. The Department will investigate complaints regarding child care. The investigation may include further contact with the complainant, scheduled or unannounced visits to the child care facility, collateral contacts including interviews with the victim, parents or guardian, administrators, operators, staff, consultants, children in care, other persons who may have knowledge of the complaint, and inspections by fire, health, or law enforcement officials. After an investigation, if it is determined by the relevant authorities that an incident occurred, it is considered “substantiated” and a summary of the incident and its possible resolution is published on IdahoChildCareCheck.org.

- 2.2.4 **Certify by describing how the Lead Agency maintains a record of substantiated parental complaints:** Records of substantiated complaints and all supporting documentation, are maintained indefinitely in the Idaho Child Care Concern Tracker, and summaries of substantiated complaints are published for three years on IdahoChildCareCheck.org.
- 2.2.5 **Certify by describing how the Lead Agency makes information about substantiated parental complaints available to the public; this information can include the consumer education website discussed in section 2.3:** Summaries of all substantiated complaints, and the response to each complaint, are published for three years on IdahoChildCareCheck.org.
- 2.2.6 **Provide the citation to the Lead Agency’s policy and process related to parental complaints:** Idaho Child Care Program IDAPA 16.06.12.003.02. Complaint Procedure. The Department will maintain a record of substantiated complaints against child care providers. Information regarding such substantiated complaints is available in accordance with the Section 006 of these rules. Daycare Licensing IDAPA 16.06.02.106. COMPLAINTS AGAINST DAYCARE CENTERS, GROUP DAYCARE FACILITIES, FAMILY DAYCARE HOMES, FOSTER HOMES, CHILDREN'S RESIDENTIAL CARE FACILITIES, CHILDREN'S THERAPEUTIC OUTDOOR PROGRAMS, CHILDREN'S CAMPS, AND CHILDREN'S AGENCIES. 01. Investigation. The Department will investigate complaints regarding daycare centers, group daycare facilities, family daycare homes voluntarily licensed by the Department, foster homes, children's residential care facilities, children's therapeutic outdoor programs, children's camps, or children's agencies. The investigation may include further contact with the complainant, scheduled or unannounced visits to the children's residential care facility, foster home, daycare center, group daycare facility, family daycare home voluntarily licensed by the Department, children's therapeutic outdoor program, children's camp, or children's agency, collateral contacts including interviews with the victim, parents or guardian, children's residential care facility or children's agency administrator, operator, staff, consultants, children in care, other persons who may have knowledge of the complaint, and inspections by fire or health officials. 02. Informed of

Action. If an initial preliminary investigation indicates that a more complete investigation must be made, the foster parents, operator, daycare center, group daycare facility, family daycare home voluntarily licensed by the Department, children's residential care facility, children's therapeutic outdoor program, children's camp, or children's agency will be informed of the investigation and any action to be taken, including referral for civil or criminal action.

2.3 Consumer Education Website

States and Territories are required to provide information to parents, the general public, and when applicable, child care providers through a State website, which is consumer-friendly and easily accessible (658E(c)(2)(E)(i)(III)). The website must include information to assist families in understanding the policies and procedures for licensing child care providers. The website information must also include provider-specific information, monitoring and inspection reports for the provider, and the quality of each provider (if such information is available for the provider) (658E(c)(2)(D); 98.33(a)). The website should also provide access to a yearly statewide report on deaths, serious injuries, and the number of cases of substantiated child abuse that have occurred in child care settings. To assist families with any additional questions, the website should provide contact information for local child care resource and referral organizations and any other agencies that can assist families in better understanding the information on the website.

To certify, respond to questions 2.3.1 through 2.3.10 by describing how the Lead Agency meets these requirements and provide the link in 2.3.11. **If the Lead Agency has not fully implemented the Consumer Education website elements identified in Section 2.3, then respond to question 2.3.12.** Please note that any changes made to the web links provided below in this section after the CCDF Plan is approved will require a CCDF Plan amendment.

- 2.3.1 Describe how the Lead Agency ensures that its website is consumer-friendly and easily accessible:** The Lead Agency ensures that its website is consumer-friendly and easily accessible in a variety of ways. First, the website www.idahostars.org is used as the platform to promote all information to parents and providers and is easy to navigate for users looking for information. Second, the website www.idahochildcarecheck.org is the identified website hosting all information pertaining to health inspections and substantiated complaints. Both sites include a search feature and the websites do not include jargon or complicated references. The text is written in plain language, with hover text to describe further, information pertaining to a topic or issue. The website also provides detailed information about who to contact for further information.
- 2.3.2 Describe how the website ensures the widest possible access to services for families that speak languages other than English (98.33(a)):** The Lead Agency website as well as IdahoStars website are offered in Spanish and interpretation services are available for those calling or needing services in person.
- 2.3.3 Describe how the website ensures the widest possible access to services for persons with disabilities:** The Department, IdahoStars and Idaho Child Care Check websites are ADA compliant to ensure accessibility to person with disabilities.
- 2.3.4 Lead Agency processes related to child care.**

A required component of the consumer education website is a description of Lead Agency policies and procedures relating to child care (98.33(a) (1)). This information includes a description of how the state/territory licenses child care, a rationale for exempting providers from licensing requirements, the procedure for conducting monitoring and inspections of providers, and the policies and procedures related to criminal background checks.

- c) Provide the link to how the Lead Agency licenses child care providers, including the rationale for exempting certain providers from licensing requirements, as described in section 5.3.6:
<https://healthandwelfare.idaho.gov/Children/ChildCareAssistance/DaycareLicensing.aspx>;
<https://idahostars.org/Child-Care-Providers/Child-Care-Licensing>
- d) Provide the link to the procedure for conducting monitoring and inspections of child care providers, as described in section 5.3.2: <https://idahostars.org/Child-Care-Providers/ICCP#require>; <http://cdhd.idaho.gov/eh-childcare-inspections.php>
- e) Provide the link to the policies and procedures related to criminal background checks for staff members of child care providers and the offenses that prevent individuals from being employed by a child care provider or receiving CCDF funds, as described in sections 5.4.1 and 5.4.11: <https://chu.dhw.idaho.gov/>

2.3.5 List of providers

The consumer education website must include a list of all licensed providers and, at the discretion of the Lead Agency, all providers eligible to deliver CCDF services, identified as either licensed or license-exempt. Providers caring for children to whom they are related do not need to be included. The list of providers **must** be searchable by ZIP Code.

- a) Provide the website link to the searchable list of child care providers:
<https://www.idahochildcarecheck.org>
www.idahostars.org
- b) In addition to the licensed providers that are required to be included in your searchable list, which additional providers are included in the Lead Agency's searchable list of child care providers (please check all that apply):
 - ☒ License-exempt center-based CCDF providers
 - ☒ License-exempt family child care (FCC) CCDF providers
 - ☐ License-exempt non-CCDF providers
 - ☒ Relative CCDF child care providers
 - ☐ Other. Describe: _____
- c) Identify what informational elements, if any, are available in the searchable results. Note: Quality information (if available) and monitoring results are required on the website but are not required to be a part of the search results.
 - **Licensed providers**
 - ☒ **Contact information**
 - ☐ **Enrollment capacity**
 - ☐ **Years in operation**

- ☒ Provider education and training
- ☒ Languages spoken
- ☒ Quality information
- ☒ Monitoring reports
- ☒ Other. Describe:

Type of care, age range for care, environment, meals, rates, special needs

- License-exempt, non-CCDF providers
 - ☐ Contact information
 - ☐ Enrollment capacity
 - ☐ Years in operation
 - ☐ Provider education and training
 - ☐ Languages spoken
 - ☐ Quality information
 - ☐ Monitoring reports
 - ☐ Other. Describe:
- License-exempt CCDF center based providers
 - ☐ Contact information
 - ☐ Enrollment capacity
 - ☐ Years in operation
 - ☐ Provider education and training
 - ☐ Languages spoken
 - ☐ Quality information
 - ☒ Monitoring reports
 - ☐ Other. Describe:
- License-exempt CCDF family child care
 - ☐ Contact information
 - ☐ Enrollment capacity
 - ☐ Years in operation
 - ☐ Provider education and training
 - ☐ Languages spoken
 - ☐ Quality information
 - ☒ Monitoring reports
 - ☐ Other. Describe:
- Relative CCDF providers
 - ☐ Contact information
 - ☐ Enrollment capacity
 - ☐ Years in operation
 - ☐ Provider education and training
 - ☐ Languages spoken
 - ☐ Quality information

- ☒ Monitoring reports
- ☐ Other. Describe:
- Other. Describe:
 - ☐ Contact information
 - ☐ Enrollment capacity
 - ☐ Years in operation
 - ☐ Provider education and training
 - ☐ Languages spoken
 - ☐ Quality information
 - ☐ Monitoring reports
 - ☐ Other. Describe:

2.3.6 Lead Agencies must also identify specific quality information on each child care provider for whom they have this information. The type of information provided is determined by the Lead Agency, and it should help families easily understand whether a provider offers services that meet Lead Agency-specific best practices and standards or a nationally recognized, research-based set of criteria. Provider-specific quality information must only be posted on the consumer website if it is available for the individual provider.

a) How does the Lead Agency determine quality ratings or other quality information to include on the website?

- ☒ Quality rating and improvement system
- ☒ National accreditation
- ☐ Enhanced licensing system
- ☐ Meeting Head Start/Early Head Start Program Performance Standards.
- ☐ Meeting prekindergarten quality requirements
- ☐ School-age standards, where applicable
- ☐ Other. Describe:

b) For what types of providers are quality ratings or other indicators of quality available?

- ☐ Licensed CCDF providers. Describe the quality information: **The goal of Steps to Quality is to help Idaho's child care programs provide a setting where all children thrive. At each step, we'll help programs grow quality in the following areas: Health and safety, Staff education, Classrooms and playground, Inclusion of all children, Partnerships with families and communities, and Professional business practices. Participation in Steps to Quality is a smart choice which demonstrates a program's commitment to excellence in child care.**
- ☒ Licensed non-CCDF providers. Describe the quality information: **The goal of Steps to Quality is to help Idaho's child care programs provide a setting where all children thrive. At each step, we'll help programs grow quality in the following areas: Health and safety, Staff education, Classrooms and playground Inclusion of all children, Partnerships with families and communities,**

Professional business practices. Participation in Steps to Quality is a smart choice which demonstrates a program's commitment to excellence in child care.

- ☒ License-exempt center-based CCDF providers. Describe the quality information: **The goal of Steps to Quality is to help Idaho's child care programs provide a setting where all children thrive. At each step, we'll help programs grow quality in the following areas: Health and safety, Staff education, Classrooms and playground Inclusion of all children, Partnerships with families and communities, Professional business practices. Participation in Steps to Quality is a smart choice which demonstrates a program's commitment to excellence in child care.**
- ☒ License-exempt FCC CCDF providers. Describe the quality information: **The goal of Steps to Quality is to help Idaho's child care programs provide a setting where all children thrive. At each step, we'll help programs grow quality in the following areas: Health and safety, Staff education, Classrooms and playground Inclusion of all children, Partnerships with families and communities, Professional business practices. Participation in Steps to Quality is a smart choice which demonstrates a program's commitment to excellence in child care.**
- ☒ License-exempt non-CCDF providers. Describe the quality information: **The goal of Steps to Quality is to help Idaho's child care programs provide a setting where all children thrive. At each step, we'll help programs grow quality in the following areas: Health and safety, Staff education, Classrooms and playground Inclusion of all children, Partnerships with families and communities, Professional business practices. Participation in Steps to Quality is a smart choice which demonstrates a program's commitment to excellence in child care.**
- ☒ Relative child care providers. Describe the quality information: **The goal of Steps to Quality is to help Idaho's child care programs provide a setting where all children thrive. At each step, we'll help programs grow quality in the following areas: Health and safety, Staff education, Classrooms and playground Inclusion of all children, Partnerships with families and communities, Professional business practices. Participation in Steps to Quality is a smart choice which demonstrates a program's commitment to excellence in child care. :**
- ☐ Other. Describe:

- 2.3.7 Lead Agencies are required to post monitoring and inspection reports on the consumer education website for each licensed provider and for each non-relative provider eligible to provide CCDF services on the consumer education website. These reports must include results of required annual monitoring visits and visits due to major substantiated complaints about a provider's failure to comply with health and safety requirements and child care policies. The reports must be in plain language, as defined by the State or Territory, and be timely to ensure that the results of the reports are available and easily understood by parents when they are deciding on a child care provider. Lead Agencies must post at least 3 years of reports when available, going forward (not retrospectively), beginning October 1, 2018.**

Certify by responding to the questions below:

- a) What is the Lead Agency's definition of plain language and describe the process for receiving feedback from parents and the public about readability of reports. **Monitoring and inspection reports are written using common, everyday words so providers and the public can understand and use what is written. There are definitions on the website for terms used within licensing and monitoring.**
- b) Are monitoring and inspection reports in plain language?
- ☒ If yes, include a website link to a sample monitoring report.
www.idahochildcarecheck.org
 - ☐ If no, describe how plain language summaries are used to meet the regulatory requirements and include a link to a sample summary. _____
- c) Check to certify what the monitoring and inspection reports and/or their plain language summaries include:
- ☒ Date of inspection
 - ☐ Health and safety violations, including those violations that resulted in fatalities or serious injuries. Describe how these health and safety violations are prominently displayed.
 - ☒ Corrective action plans taken by the State and/or child care provider. Describe
The actions the Facility and Provider took in order to correct their violations are included in published inspections.
- d) The process for correcting inaccuracies in reports. **All non-compliance issues are reviewed with the provider before the inspector leaves the program. All providers are given a compliance plan outlining all non-compliance issues. Providers at any time have the opportunity to address any inaccuracies in the inspection report and correct on site. Inaccuracies identified are either changed immediately or the non-compliance is justified with the provider before being posted online. If an inaccuracy is identified after the report is posted online, changes can still be made immediately once the inaccuracy is identified and reposted by the Lead Agency.**
- e) The process for providers to appeal the findings in reports, including the time requirements, and **timeframes for filing the appeal, for the investigation, and for removal of any violations from the website determined on appeal to be unfounded. At the time an inspection is posted online, the provider has agreed and signed off on the substantiated complaint, therefore, there are no appeal rights to those findings.**
- f) How reports are posted in a timely manner. Specifically, provide the Lead Agency's definition of "timely" and describe how it ensures that reports are posted within its timeframe. **Note: While Lead Agencies define "timely," we recommend Lead Agencies update results as soon as possible and no later than 90 days after an inspection or corrective action is taken. After an inspection, all monitoring documentation is reviewed by the licensing or child care specialist to ensure completeness and accuracy. The report is then posted to the on-line system within 60 days after the inspection visit.**

- g) Describe the process for maintaining monitoring reports on the website. Specifically, provide the minimum number of years reports are posted and the policy for removing reports (98.33(a)(4)(iv)). **Inspection reports will be removed from the website after three years from the date the report was initially posted.**
- h) Any additional providers on which the Lead Agency chooses to include reports. Note: Licensed providers and CCDF providers must have monitoring and inspection reports posted on their consumer education website.
- ☒ License-exempt non-CCDF providers
 - ☐ Relative child care providers
 - ☐ Other. Describe:

2.3.8 Aggregate data on serious injuries, deaths, and substantiated cases of child abuse that have occurred in child care settings each year must be posted on the consumer education website. This aggregate information on serious injuries and deaths must be organized by category of care (e.g., center, FCC, etc.) and licensing status for all eligible CCDF provider categories in the state. The information on instances of substantiated child abuse does not have to be organized by category of care or licensing status. The aggregate report should not list individual provider-specific information or names.

Certify by providing:

- a) The designated entity to which child care providers must submit reports of any serious injuries or deaths of children occurring in child care (98.16 (ff)) and describe how the Lead Agency obtains the aggregate data from the entity. **Idaho Department of Health and Welfare is the agency to which child care providers must submit reports of any serious injuries or deaths of children occurring in their child care. IDHW aggregates information, annually, from data collected in the incident tracker published on Idaho Child Care Check website and is posted on the Department Child Care Assistance page, along with the States Child Death Review Board annual report.**
- b) The definition of “substantiated child abuse” used by the Lead Agency for this requirement. **Incidents regarding children who were physically or sexually harmed or left alone by their provider without adult supervision.**
- c) The definition of “serious injury” used by the Lead Agency for this requirement. **Incidents regarding children that required hospitalization or a doctor’s care.**
- d) The website link to the page where the aggregate number of serious injuries, deaths, and substantiated instances of child abuse are posted. _____
<https://healthandwelfare.idaho.gov/Children/ChildCareAssistance/tabid/292/Default.aspx>

2.3.9 The consumer education website should include contact information on referrals to local child care resource and referral organizations. How does the Lead Agency provide referrals to local CCR&R agencies through the consumer education website? Describe and include a website link to this information: **Idaho Child Care Check website is not only searchable on its own but it is also embedded into the search criteria for all parents searching for care on www.idahostars.org.**

- 2.3.10 The consumer education website should include information on how parents can contact the Lead Agency, or its designee, or other programs that can help the parent understand information included on the website. Describe and include a website link to this information: On IdahoChildCareCheck.org at the bottom of the page clearly identifies how and where individuals and families can go or call in need of assistance. It states “To find a child care provider that meets your family's needs, please contact the Idaho Careline by dialing 2-1-1 to speak with a Child Care Referral Specialist”. Also, on ‘Search for Care’ on IdahoStars.org, this statement is listed on the bottom of the website “Please note: The more options selected above, the fewer child care names will match. To broaden your results to include a larger number of providers, consider shortening your hours and/or selecting fewer fields. If you have difficulty finding programs that meet your search criteria, please call the Idaho Careline by dialing 2-1-1 or 1-800-926-2588.”.
- 2.3.11 Provide the website link to the Lead Agency’s consumer education website. Note: An amendment is required if this website changes.
<https://idahostars.org/>
<https://www.idahochildcarecheck.org/>
- 2.3.12 Other. Identify and describe the components that are still pending per the instructions on *CCDF Plan Response Options for Areas where Implementation is Still in Progress* in the Introduction.
 N/A

2.4 Additional Consumer and Provider Education

Lead Agencies are required to certify that they will collect and disseminate information about the full diversity of child care services to promote parental choice to parents of eligible children, the general public, and where applicable, child care providers. In addition to the consumer education website, the consumer education information can be provided through CCR&R organizations or through direct conversations with eligibility case workers and child care providers. Outreach and counseling can also be effectively provided via information sessions or intake processes for families (658E(c)(2)(E); 98.15(b)(4); 98.33(b)).

In questions 2.4.1 through 2.4.5, certify by describing:

- 2.4.1 How the Lead Agency shares information with eligible parents, the general public, and where applicable, child care providers about the availability of child care services provided through CCDF and other programs for which the family may be eligible, such as state preK, as well as the availability of financial assistance to obtain child care services. At a minimum, describe what is provided (e.g., such methods as written materials, the website, and direct communications) and how information is tailored for these audiences.
 DHW utilizes video which is played statewide in the lobbies of our local offices; DHW provides information via websites (<http://healthandwelfare.idaho.gov/Children/ChildCareAssistance/tabid/292/Default.aspx> ; <https://www.livebetteridaho.org/>), vendor booths, blogs (<https://dhwblog.com/>), and social media tools (<https://www.facebook.com/IdahoHealthandWelfare/> ; <https://www.facebook.com/IdahoSTARS-252266474799407/?fref=ts>) as well brochures (<http://healthandwelfare.idaho.gov/Portals/0/Children/ChildCare/HW0219.pdf> ;

<http://healthandwelfare.idaho.gov/Portals/0/Children/ChildCare/HW0219S.pdf>) are disseminated to partners within the community who serve families with children.

- 2.4.2 The partnerships formed to make information about the availability of child care services available to families. Idaho partners with the CCRC offices statewide, Homeless Non-Profit organizations, Department of Education McKinney-Vento Coordinators, and other State Departments serving children and families.
- 2.4.3 How the Lead Agency provides the required information about the following programs and benefits to the parents of eligible children, the general public, and where applicable, providers. In the description include, at a minimum, what information is provided, how the information is provided, and how the information is tailored to a variety of audiences and include any partners who assist in providing this information.
- ☒ Temporary Assistance for Needy Families program: 211 Careline houses information about all identified programs as well as brochures are available and shared with partners and families, pertaining to each human service program. All Self Reliance Specialists who conduct statewide eligibility discuss all programs through the informed choice intake process. The Idaho Application for Assistance is available online or can be completed over the phone and covers all eligibility programs within the Division of Welfare(child care, SNAP, Medicaid, Child Support, TAFI, Health Care Assistance). At the time of application, families are informed of programs and makes referrals to other programs which pertain to families' needs. Idaho recently launched a new website called Live Better Idaho (www.livebetteridaho.org) which is a consumer friendly website targeted at identifying all potential programs families could access based on three components (household size, age of people in the household, gross income, and zip code). The icons that pop up are specific for each family and within three clicks can direct them to all potential services and so the client may begin applying immediately.
 - ☒ Head Start and Early Head Start programs: DHW provides a monthly report to each Head Start, with information about possible eligible families. Parents receive a letter, informing them of services Head Start/Early Head Start can provide and information on how to apply. Child Care Resource Center (CCRC) staff provide assistance to parents in accessing information on the DHW website as well as Head Start/Early Head Start websites. CCRC offices maintain fliers/brochures on site for parents interested in more information about Head Start and Early Head Start.
 - ☒ Low Income Home Energy Assistance Program (LIHEAP): 211 Careline houses information about all identified programs as well as brochures are available and shared with partners and families, pertaining to each human service program. All Self Reliance Specialists who conduct statewide eligibility discuss all programs through the informed choice intake process. Idaho recently launched a new website called Live Better Idaho (www.livebetteridaho.org) which is a consumer friendly website targeted at identifying all potential programs families could access based on three components (household size, age of people in the household, gross income, and zip code). The

icons that pop up are specific for each family and within three clicks can direct them to all potential services and so the client may begin applying immediately.

- ☒ Supplemental Nutrition Assistance Programs (SNAP) Program: : 211 Careline houses information about all identified programs as well as brochures are available and shared with partners and families, pertaining to each human service program. All Self Reliance Specialists who conduct statewide eligibility discuss all programs through the informed choice intake process. The Idaho Application for Assistance is available online or can be completed over the phone and covers all eligibility programs within the Division of Welfare (child care, SNAP, Medicaid, Child Support, TAFI, Health Care Assistance). At the time of application, families are informed of programs and makes referrals to other programs which pertain to families' needs. Idaho recently launched a new website called Live Better Idaho (www.livebetteridaho.org) which is a consumer friendly website targeted at identifying all potential programs families could access based on three components (household size, age of people in the household, gross income, and zip code). The icons that pop up are specific for each family and within three clicks can direct them to all potential services and so the client may begin applying immediately.
- ☒ Women, Infants, and Children Program (WIC) program: Parents receive a WIC brochure in the Referral Packet sent by the Child Care Resource Center (CCRC) Resource Specialists as part of the referral process. In addition, parents receive a letter containing the link for WIC. Idaho recently launched a new website called Live Better Idaho (www.livebetteridaho.org) which is a consumer friendly website targeted at identifying all potential programs families could access based on three components (household size, age of people in the household, gross income, and zip code). The icons that pop up are specific for each family and within three clicks can direct them to all potential services and so the client may begin applying immediately.
- ☒ Child and Adult Care Food Program(CACFP): Parents receive informational brochures about CACFP in the Referral Packet sent by the Child Care Resource Center (CCRC) Resource Specialists as part of the referral process.
- ☒ Medicaid and Children's Health Insurance Program (CHIP): Parents receive informational brochures in the Referral Packet sent by the Child Care Resource Center (CCRC) Resource Specialists as part of the referral process. 211 Careline houses information about all identified programs as well as brochures are available and shared with partners and families, pertaining to each human service program. All Self Reliance Specialists who conduct statewide eligibility discuss all programs through the intake process. Idaho recently launched a new website called Live Better Idaho (www.livebetteridaho.org) which is a consumer friendly website targeted at identifying all potential programs families could access based on three components (household size, age of people in the household, gross income, and zip code). The icons that pop up are specific for each family and within three clicks can direct them to all potential services and so the client may begin applying immediately.

- ☒ Programs carried out under **IDEA Part B, Section 619 and Part C: As part of the referral process, a Referral Packet is sent by the Child Care Resource Center (CCRC) Resource Specialists. In the packet parents receive a letter from the Child Care Resource Center (CCRC) office that contains a link to IDEA.**

2.4.4 Describe how the Lead Agency makes available to parents, providers, and the general public information on research and best practices concerning children’s development, including physical health and development, particularly healthy eating and physical activity. Information about successful parent and family engagement should also be shared. At a minimum, include what information is provided, how the information is provided, and how the information is tailored to a variety of audiences and include any partners in providing this information.

Parents: Parent who contact CCRC seeking a referral for child care and who request information on research and best practices concerning childrens’ development may be connected with their Child Care Health Consultant or Quality Consultant for additional resources. Parents may also access IdahoStars webpage for additional resources and connections to organizations in their local area. **Providers:** Training opportunities are available to providers who seek to gain information on early childhood mental health. Idaho’s QRIS, Steps to Quality, has embedded Essential Training which includes specific content on this topic area, and additional lending library resources are available from their local CCR&Rs. Providers who contact their CCR&R may also receive information through flyers, brochures, and other handouts that are contained in the CCR&R resource packets. Resource packets are specific to the local communities that each region serves. Child Care Health Consultants are available statewide to assist providers with addressing questions and/or concerns that focus on early childhood mental health. **General public:** The Parent pages of the IdahoSTARS website contains information on family health and wellness resources, outling general resources that can help provide children a healthy start at home and in their child care setting.

2.4.5 Describe how information on the Lead Agency’s policies regarding the social-emotional and behavioral issues and early childhood mental health of young children, including positive behavioral intervention and support models based on research and best practices for those from birth to school age, are shared with families, providers, and the general public. At a minimum, include what information is provided, how the information is provided, and how information is tailored to a variety of audiences and include any partners in providing this information.

Parents: Parents who contact the CCR&R seeking a referral for child care and who request information on children’s mental health may be connected with their Child Care Health Consultant and may be provided with contacts for additional information and resources. Parents may also access the IdahoSTARS Facebook page and the IdahoSTARS website for additional resources. Parents who contact their CCR&R may also receive information through flyers, brochures, and other handouts that are contained in the CCR&R resource packets. Resource packets are specific to the local communities that each region serves.

Providers: Training opportunities are available to providers who seek to gain information on early childhood mental health. Idaho’s QRIS, Steps to Quality, has embedded Essential Training which includes specific content on this topic area, and additional lending library resources are available from their local CCR&Rs. Providers also now have access to becoming specialized in Infant Toddler mental Health through enhanced credentials. Providers who contact their CCR&R may also receive information through flyers, brochures, and other

handouts that are contained in the CCR&R resource packets. Resource packets are specific to the local communities that each region serves. Child Care Health Consultants are available statewide to assist providers with addressing questions and/or concerns that focus on early childhood mental health.

General public: The Parent pages of the IdahoSTARS website contains information on Aim Early Idaho and on children with disabilities, the Provider pages includes the Child Care Health Consultant information with links to early childhood mental health, the IdahoSTARS Facebook contains posts with resources and information on early childhood mental health; CCR&R staff participate in community events and disseminate information/resources using brochures, flyers, and/or handouts.

- 2.4.6 Describe the Lead Agency's policies to prevent the suspension and expulsion of children from birth to age 5 in child care and other early childhood programs receiving CCDF funds (98.16(ee)), including how those policies are shared with families, providers, and the general public. Idaho currently does not have identified policies outlined for families, providers and the general public pertaining to the prevention of suspension and expulsion of children from birth to age 5 in child care and other early childhood programs.

2.5 Procedures for Providing Information on Developmental Screenings

Lead Agencies are required to provide information on developmental screenings, including information on resources and services that the State can deploy, such as the use of the Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program carried out under title XIX of the Social Security Act and developmental screening services available under IDEA Part B, Section 619 and Part C, in conducting those developmental screenings and in providing referrals to services for children who receive subsidies. Lead Agencies must also include a description of how a family or child care provider can use these resources and services to obtain developmental screenings for children who receive subsidies and who might be at risk of cognitive or other developmental delays, which can include social, emotional, physical, or linguistic delays (658E(c)(2)(E)(ii)). Lead Agencies are required to provide this information to eligible families during CCDF intake and to child care providers through training and education (98.33(c)).

2.5.1 Certify by describing:

- a) How the Lead Agency collects and disseminates information on existing resources and services available for conducting developmental screenings to CCDF parents, the general public, and where applicable, child care providers (98.15(b)(3)).
The IdahoSTARS website has a webpage specifically for child care providers with a focus on children with diverse abilities. It includes information on the benefits of inclusion, the laws regarding inclusion, and strategies for supporting inclusion in their own program. Additionally, the page offers a list of programs and resources that providers may utilize as they help connect families to necessary supportive services.
<https://idahostars.org/Parents/Inclusive-Child-Care>
- b) The procedures for providing information on and referring families and child care providers to the Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program—carried out under Title XIX of the Social Security Act (42 U.S.C. 1396 et seq.)—and developmental screening services available under Part B, Section 619 and Part C of the

Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.).

IdahoSTARS utilize the developmental screening brochures in collaboration with the state IDEA Part C and Section 619 partners to target child care providers and families within programs. Brochures assist child care providers with referring families for developmental screening and assist families with determining where and how to access developmental screenings.

- c) How the Lead Agency gives information on developmental screenings to parents receiving a subsidy as part of the intake process. Include the information provided, ways it is provided, and any partners in this work. **DHW Notices going to all eligible families provide information about the importance of developmental screenings and how to access information about obtaining screenings.**
- d) How CCDF families or child care providers receiving CCDF can use the available resources and services to obtain developmental screenings for CCDF children at risk for cognitive or other developmental delays. **Idaho families and providers can contact 211 Idaho Careline and ask for Idaho Infant Toddler Program which will connect individuals to program staff who will assist in providing the developmental screening materials as well as additional resources.**
- e) How child care providers receive this information through training and professional development. **Technical assistance activities through the Child Care Health Consultant Program and Child Care Resource and Referral Consultants to support interested programs with conducting developmental screening onsite.**
- f) Provide the citation for this policy and procedure related to providing information on developmental screenings. **Embedded within automation of notices sent to all families, no citation for policy referenced.**

2.6 Consumer Statement for Parents Receiving CCDF Funds

Lead Agencies must provide CCDF parents with a consumer statement in hard copy or electronically (such as referral to a consumer education website) that contains specific information about the child care provider they select. This information about the child care provider selected by the parent includes health and safety requirements met by the provider, any licensing or regulatory requirements met by the provider, the date the provider was last inspected, any history of violations of these requirements, and any voluntary quality standards met by the provider. It must also describe how CCDF subsidies are designed to promote equal access, how to submit a complaint through a hotline, and how to contact local resource and referral agencies or other community-based supports that assist parents in finding and enrolling in quality child care (98.33(d)). Please note that if the consumer statement is provided electronically, Lead Agencies should consider how to ensure that the statement is accessible to parents and that parents have a way to contact someone to address questions they have.

2.6.1 Certify by describing:

- a) How the Lead Agency provides parents receiving CCDF funds with a consumer statement. **DHW is in the process of adding a consumer statement to all notices sent to subsidy recipients. The consumer statement will refer them to the provider search at IdahoSTARS.org where they can access health and safety requirements met by the provider, any licensing or regulatory requirements met by the provider, the date the**

provider was last inspected, any history of violations of these requirements, and any voluntary quality standards met by the provider. Proposed language to the statement notes that CCDF subsidies are designed to promote equal access, how to submit a complaint through a hotline, and how to contact an IdahoSTARS Referral Specialist to assist parents in finding and enrolling in quality child care.

- b) What is included in the statement, including when the consumer statement is provided to families. DHW is in the process of adding a consumer statement to all notices sent to subsidy recipients. The consumer statement will refer them to the provider search at IdahoSTARS.org where they can access health and safety requirements met by the provider, any licensing or regulatory requirements met by the provider, the date the provider was last inspected, any history of violations of these requirements, and any voluntary quality standards met by the provider. Proposed language to the statement notes that CCDF subsidies are designed to promote equal access, how to submit a complaint through a hotline, and how to contact an IdahoSTARS Referral Specialist to assist parents in finding and enrolling in quality child care.
- c) Provide a link to a sample consumer statement or a description if a link is not available. DHW is in the process of adding a consumer statement to all notices sent to subsidy recipients. The consumer statement will refer them to the provider search at IdahoSTARS.org where they can access health and safety requirements met by the provider, any licensing or regulatory requirements met by the provider, the date the provider was last inspected, any history of violations of these requirements, and any voluntary quality standards met by the provider. Proposed language to the statement notes that CCDF subsidies are designed to promote equal access, how to submit a complaint through a hotline, and how to contact an IdahoSTARS Referral Specialist to assist parents in finding and enrolling in quality child care.

3 Provide Stable Child Care Financial Assistance to Families

In providing child care assistance to families, Lead Agencies are required to implement these policies and procedures: a minimum 12-month eligibility and redetermination periods, a process to account for irregular fluctuations in earnings, a policy ensuring that families' work schedules are not disrupted by program requirements, policies to provide for a job search of not fewer than 3 months if the Lead Agency exercises the option to discontinue assistance, and policies for the graduated phase-out of assistance. In addition, procedures for the enrollment of children experiencing homelessness and children in foster care, if served, pending the completion of documentation, are required.

Note: Lead Agencies are not prohibited from establishing policies that extend eligibility beyond 12 months to align program requirements. For example, Lead Agencies can allow children enrolled in Head Start, Early Head Start, state or local prekindergarten, and other collaborative programs to finish the program year. This type of policy promotes continuity for families receiving services through multiple benefit programs.

In this section, Lead Agencies will identify how they define eligible children and families and how the Lead Agency improves access for vulnerable children and families. This section also

addresses the policies that protect working families and determine a family's contribution to the child care payment.

3.1 Eligible Children and Families

At the time when eligibility is determined **or redetermined**, children must (1) be younger than age 13; (2) reside with a family whose income does not exceed 85 percent of the State's median income for a family of the same size and whose family assets do not exceed \$1,000,000 (as certified by a member of said family); and (3)(a) reside with a parent or parents who are working or attending a job training or educational program or (b) receives, or needs to receive, protective services and resides with a parent or parents not described in (3)(a) (658P(4)).

3.1.1 Eligibility criteria based on a child's age

- a) The CCDF program serves children from **0** (weeks/months/years) through **12** years (under age 13). *Note:* Do not include children incapable of self-care or under court supervision, who are reported below in (b) and (c). **(IDAPA 16.06.12.105.03)**
- b) Does the Lead Agency allow CCDF-funded child care for children ages 13 and older but below age 19 who are physically and/or mentally incapable of self-care (658E(c)(3)(B); 658P(3))?
 - ☐ No
 - ☒ Yes, and the upper age is **The month of their nineteenth birthday**. (may not equal or exceed age 19). If yes, provide the Lead Agency definition of physical **and/or** mental incapacity: **"Physically or mentally incapable of self-care, as verified by a licensed mental health professional or licensed practitioner of the healing arts."** **(IDAPA 16.06.12.105.03.a.)**
- c) Does the Lead Agency allow CCDF-funded child care for children ages 13 and older but below age 19 who are under court supervision ((658P(3); 658E(c)(3)(B)))?
 - ☐ No
 - ☒ Yes, and the upper age is **The month of their nineteenth birthday**. (may not equal or exceed age 19). **(IDAPA 16.06.12.105.03.b.)**
- d) How does the Lead Agency define the following eligibility terms?
 - "residing with": Child Custody: A child may move from one (1) parent's home to the other parent's home on a regular basis. The child may be a member of either household, but not both households. If the parents cannot agree on the child's household for the child care benefit, the child is included in the household with primary custody. Primary custody is determined by where the child is expected to spend fifty-one percent (51%) or more of the nights during a benefit period. When only one (1) parent applies for ICCP benefits, the child may be included in that parent's household even though they do not have primary physical custody of the child. (IDAPA: 16.06.12.105.04)**
 - "in loco parentis": In Loco Parentis: Acting "in loco parentis" means a person who acts in place of a parent, assuming care and custody of a child by legal guardianship. (IDAPA 16.06.12.010.14)**

3.1.2 Eligibility criteria based on reason for care

- a) How does the Lead Agency define “working or attending a job training and educational program” for the purposes of CCDF eligibility at the time of determination? Provide the definitions below for:

“Working” (including activities and any hour requirements): **Employment: A job paying wages or salary at federal or state minimum wage, whichever is applicable, including work paid by commission or in-kind compensation. Full or parttime participation in a VISTA or AmeriCorps program is also employment. (IDAPA: 16.06.12.010.08) Self-Employment. The parent is currently self-employed in a business that is a sole proprietorship. A sole proprietorship is a business owned by one (1) person. Restrictions apply for self-employment as follows: a. For the first twelve (12) months of self-employment benefits, actual activity hours are used. b. At month thirteen (13), the number of activity hours will be limited. To calculate the activity hours, the net monthly self-employment income is divided by the current federal minimum wage. The qualifying activity hours are the lesser of the calculated activity hours or actual activity hours. (IDAPA: 16.06.12.200)**

“Job training” (including activities and any hour requirements): **Job Training and Education Program: A program designed to provide job training or education. Programs may include high school, junior college, community college, college or university, general equivalency diploma (GED), technical school, and vocational programs. To qualify as a Job Training and Education Program, the program must prepare the trainee for employment. (IDAPA: 16.06.12.010.16.) Training or Education. The parent is attending an accredited education or training program. The following restrictions apply to training or education activities: a. On-line classes cannot be counted as a qualifying activity for child care. b. Persons who are attending post-baccalaureate classes with no other qualifying activity, do not qualify for child care benefits. c. More than forty-eight (48) months of post-secondary education has been used as a qualifying activity. (IDAPA: 16.06.12.200)**

“Education” (including activities and any hour requirements): **Job Training and Education Program: A program designed to provide job training or education. Programs may include high school, junior college, community college, college or university, general equivalency diploma (GED), technical school, and vocational programs. To qualify as a Job Training and Education Program, the program must prepare the trainee for employment. (IDAPA: 16.06.12.010.16.) Training or Education. The parent is attending an accredited education or training program. The following restrictions apply to training or education activities: a. On-line classes cannot be counted as a qualifying activity for child care. b. Persons who are attending post-baccalaureate classes with no other qualifying activity, do not qualify for child care benefits. c. More than forty-eight (48) months of post-secondary education has been used as a qualifying activity. (IDAPA: 16.06.12.200)**

“Attending job training or education” (e.g. number of hours, travel time): **Job Training and Education Program: A program designed to provide job training or education. Programs may include high school, junior college, community college, college or university, general equivalency diploma (GED), technical school, and vocational programs. To qualify as a Job Training and Education Program, the program must prepare the trainee for employment. (IDAPA: 16.06.12.010.16.) Training or Education. The parent is attending an accredited education or training program. The following restrictions apply to training or education activities: a. On-line classes cannot be counted as a qualifying activity for child care. b.**

Persons who are attending post-baccalaureate classes with no other qualifying activity, do not qualify for child care benefits. c. More than forty-eight (48) months of post-secondary education has been used as a qualifying activity. (IDAPA: 16.06.12.200)

- b) Does the Lead Agency allow parents to qualify for CCDF assistance on the basis of education and training participation alone (without additional minimum work requirements)?
- ☐ No. If no, describe the additional work requirements:
- ☒ Yes. If yes, describe the policy or procedure: **IDAPA 16.06.12.200. QUALIFYING ACTIVITIES FOR CHILD CARE BENEFITS. To be eligible for child care benefits, each parent included in the household must need child care because they are engaged in one (1) of the qualifying activities listed in Subsections 200.01 through 200.05 of this rule. 03. Training or Education. The parent is attending an accredited education or training program. The following restrictions apply to training or education activities: a. On-line classes cannot be counted as a qualifying activity for child care. b. Persons who are attending post-baccalaureate classes with no other qualifying activity, do not qualify for child care benefits. c. More than forty-eight (48) months of post-secondary education has been used as a qualifying activity.**
- c) Does the Lead Agency consider seeking employment (engaging in a job search) an eligible activity at initial eligibility determination (at application) and at the 12-month eligibility redetermination? (Note: If yes, Lead Agencies must provide a minimum of three months of job search)
- ☒ No
- ☐ Yes. If yes, describe the policy or procedure (including any differences in eligibility at initial eligibility determination vs. redetermination of eligibility):
- d) Does the Lead Agency provide child care to children in protective services?
- ☐ No
- ☒ Yes. If yes:
- i. Please provide the Lead Agency's definition of "protective services":
Services needed to reduce or eliminate the need for protective intervention. Preventive services permit families to participate in activities designed to reduce or eliminate the need for out-of-home placement of a child by the Department. (16.06.12.011.05.)
Note: Federal requirements allow other vulnerable children identified by the Lead Agency not formally in child protection to be included in the Lead Agency's definition of protective services for CCDF purposes. A Lead Agency may elect to provide CCDF-funded child care to children in foster care when foster care parents are *not* working or are *not* in education/training activities, but this provision should be included in the protective services definition above.
- ii. Are children in foster care considered to be in protective services for the purposes of eligibility at determination?
- ☐ No
- ☒ Yes

- iii. Does the Lead Agency waive the income eligibility requirements for cases in which children receive, or need to receive, protective services on a case-by-case basis (658E(c)(5))?
- ☒ No
☐ Yes
- iv. Does the Lead Agency provide respite care to custodial parents of children in protective services?
- ☒ No
☐ Yes

3.1.3 Eligibility criteria based on family income. Note: The question in 3.1.3 relates to initial determination. Redetermination is addressed in 3.1.7.

- a) How does the Lead Agency define “income” for the purposes of eligibility at the point of initial determination? **All gross earned and unearned income is counted in determining eligibility and the child care benefit amount, unless specifically excluded. (IDAPA: 16.06.12.071.)**
- b) Provide the CCDF income eligibility limits in the table below at the time of initial determination. Complete columns (a) and (b) based on maximum eligibility at initial entry into CCDF. Complete columns (c) and (d) *only if* the Lead Agency is using income eligibility limits lower than 85 percent of the current state median income (SMI) at the initial eligibility determination point. Fill in the chart based on the most populous area of the state (the area serving the highest number of CCDF children). If the income eligibility limits are not statewide, please respond to c) below the table.

	(a)	(b)	(c)	(d)
Family Size	100% of SMI (\$/Month)	85% of SMI (\$/Month) [Multiply (a) by 0.85]	(IF APPLICABLE) (\$/Month) Maximum Initial or First Tier Income Limit (or Threshold) if Lower Than 85% of Current SMI	(IF APPLICABLE) (% of SMI) [Divide (c) by (a), multiply by 100] Income Level if Lower Than 85% of Current SMI
1	n/a	n/a	n/a	n/a
2	\$3513	\$2986	\$1760	50.0%
3	\$4340	\$3689	\$2213	50.0%
4	\$5166	\$4391	\$2665	51.6%
5	\$5993	\$5094	\$3118	52.0%

- c) If the income eligibility limits are not statewide, describe how many jurisdictions set their own income eligibility limits and provide the income limit ranges across the jurisdictions (e.g. range from [lowest limit] to [highest limit])(98.16(i)(3)).
Income limits are shared statewide.

Reminder: Income limits must be established and reported in terms of current SMI based on the most recent data published by the Bureau of the Census (98.20(a)(2)(i)) even if the federal poverty level is used in implementing the program. SMI guidelines are available at: <https://www.acf.hhs.gov/ocs/resource/liheap-im2017-03>.

d) SMI source and year.

Current source: The Low-Income Home Energy Assistance Program Announces the State Median Income Estimates for Federal Fiscal Year 2016:

**<https://www.federalregister.gov/articles/2015/06/10/2015-14187/the-low-income-homeenergy-assistance-program-announces-the-state-median-income-estimates-for>
Source and calculations will be updated 10/1/2018.**

e) **Identify the most populous area of the State used to complete the chart above.**

Income limits are shared statewide. The most populous area of the State is the City of Boise.

f) What was the date that these eligibility limits in column (c) became effective? **10/1/2017**

g) Provide the citation or link, if available, for the income eligibility limits.

<http://healthandwelfare.idaho.gov/FoodCashAssistance/ApplyforAssistance/Applyforservices/Whoiseligible/tabid/1556/Default.aspx>

3.1.4 Lead Agencies are required to ensure that children receiving CCDF funds do not have family assets that exceed \$1,000,000, as certified by a family member (98.20(a)(2)(ii)).

a) Describe how the family member certifies that family assets do not exceed \$1,000,000 (e.g., a checkoff on the CCDF application). **IDAPA 16.06.12.078. ASSET CAP. A family must not be in possession of assets exceeding one million dollars (\$1,000,000). Families certify that their household assets do not exceed one million dollars (\$1,000,000) at the time of application, and again during reevaluation.**

b) Does the Lead Agency waive the asset limit on a case-by-case basis for families defined as receiving, or in need of, protective services?

☒ No

☐ Yes. If yes, describe the policy or procedure and **provide citation:**

3.1.5 Describe any additional eligibility conditions or priority rules, which should only be applied by the Lead Agency during eligibility determination or redetermination (98.20(b)). IDAPA 16.06.12.105. ELIGIBLE CHILD. A family can only receive child care benefits for eligible children. A child is eligible for child care benefits under the following conditions: 01. Immunizations Requirements. A child must be immunized in accordance with IDAPA 16.02.11, "Immunization Requirements for Children Attending Licensed Daycare Facilities in Idaho." Child care benefits can continue during a reasonable period necessary for the child to be immunized. Parents must provide evidence that the child has been immunized unless the child is attending school. 02. Citizenship or Alien Status Requirement. A child must be one (1) of the following: a. A citizen; b. Living lawfully in the United States

3.1.6 Lead Agencies are required to take into consideration children's development and promote continuity of care when authorizing child care services (98.21(f); 98.16(h)(6)). Check the approaches, if applicable, that the Lead Agency uses when considering children's development and promoting continuity of care when authorizing child care services.

- ☐ Coordinating with Head Start, prekindergarten, or other early learning programs to create a package of arrangements that accommodates parents' work schedules
- ☐ Inquiring about whether the child has an Individualized Education Program (IEP) or Individual Family Services Plan (IFSP)
- ☒ Establishing minimum eligibility periods greater than 12 months
- ☐ Using cross-enrollment or referrals to other public benefits
- ☐ Working with IDEA Part B, Section 619 and Part C staff to explore how services included in a child's IEP or IFSP can be supported and/or provided onsite and in collaboration with child care services
- ☐ Providing more intensive case management for families with children with multiple risk factors;
- ☐ Implementing policies and procedures that promote universal design to ensure that activities and environments are accessible to all children, including children with sensory, physical, or other disabilities
- ☐ Other. Describe:

3.1.7 Policies and processes for graduated phase-out of assistance at redetermination.

Lead Agencies are required to provide for a graduated phase-out of assistance for families whose income has increased above the state's initial income threshold at the time of redetermination but remains below the federal threshold of 85 percent of the state median income. Providing a graduated phase-out promotes continuity by allowing for wage growth, allows for a tapered transition out of the child care subsidy program as income increases, and supports long-term self-sufficiency for families.

Lead Agencies that establish initial family income eligibility below 85 percent of SMI must provide a graduated phase-out by implementing a two-tiered eligibility threshold, with the second tier of eligibility (used at the time of eligibility redetermination) to be set at:

- i. 85 percent of SMI for a family of the same size
- ii. An amount lower than 85 percent of SMI for a family of the same size but above the Lead Agency's initial eligibility threshold that:
 - (A) Takes into account the typical household budget of a low-income family
 - (B) Provides justification that the second eligibility threshold is:
 - (1) Sufficient to accommodate increases in family income over time that are typical for low-income workers and that promote and support family economic stability
 - (2) Reasonably allows a family to continue accessing child care services without unnecessary disruption.

At redetermination, a child shall be considered eligible if his or her parents are working or attending a job training or educational program even if their income exceeds the Lead Agency's income limit to initially qualify for assistance as long as their income does not exceed the second tier of eligibility (98.21(a); 98.21(b)(1)). **Note that once deemed eligible, the family shall be**

considered eligible for a full minimum 12-month eligibility period, even if their income exceeds the second tier of eligibility during the eligibility period, as long as it does not exceed 85 percent of SMI.

A family eligible for services via the graduated phase-out of assistance is considered eligible under the same conditions as other eligible families with the exception of the copayment restrictions, which do not apply to a graduated phase-out. To help families transition from child care assistance, Lead Agencies may gradually adjust copay amounts for families whose children are determined eligible under a graduated phase-out and may require additional reporting on changes in family income. However, Lead Agencies must still ensure that any additional reporting requirements do not constitute an undue burden on families.

a) Check and describe the option that best identifies the Lead Agency's policies and procedures regarding the graduated phase-out of assistance.

- ☐ N/A. The Lead Agency sets its initial eligibility threshold at 85 percent of SMI and, therefore, is not required to provide a graduated phase-out period.
- ☐ N/A. The Lead Agency sets its exit eligibility threshold at 85 percent of SMI and, therefore, is not required to provide a graduated phase-out period.
- ☐ The Lead Agency sets the second tier of eligibility at 85 percent of SMI.
 - Describe the policies and procedures.
 - Provide the citation for this policy or procedure.
- ☒ The Lead Agency sets the second tier of eligibility at an amount lower than 85 percent of SMI for a family of the same size but above the Lead Agency's initial eligibility threshold.
 - Provide the second tier of eligibility for a family of three.
150% of Federal Poverty Limit
 - Describe how the second eligibility threshold:
 - i. Takes into account the typical household budget of a low-income family:
The Lead Agency excludes various income to support families as defined in IDAPA 16.06.12.072. 072. EXCLUDED INCOME. The following sources of income are not counted as family income. (4-2-08) 01. Earned Income of a Dependent Child. Income earned by a dependent child under age eighteen (18) is not counted, unless the child is a parent who is seeking or receiving child care benefits. (4-2-08) IDAHO ADMINISTRATIVE CODE IDAPA 16.06.12 – Rules Governing the Department of Health and Welfare Idaho Child Care Program (ICCP) Section 073 Page 9 02. Income Received for Person Not Residing With the Family. Income received on behalf of a person who is not living in the home. (4-2-08) 03. Educational Funds. All educational funds including grants, scholarships, an AmeriCorps Education Award, and federal and state work-study income. (4-2-08) 04. Assistance. Assistance to meet a specific need from other organizations and agencies. (4-2-08) 05. Lump Sum Income. Non-recurring lump sum income is excluded. (3-28-18) 06. Loans. A loan is money received that is to be repaid. (3-2-17) 07. TAFI and AABD Benefits. (4-4-13) 08. Foster Care Payments. (4-4-13) 09. AmeriCorps/VISTA Volunteers. Living allowances, wages and stipends paid

to AmeriCorps or VISTA volunteers under 42 U.C.S. 5044, P.L. 93-113, Title IV, Section 404(g) are excluded as income. (4-2-08) 10. Income Tax Refunds and Earned Income Tax Credits. Income tax refunds and earned income tax credits are excluded as income. (4-2-08) 11. Travel Reimbursements. Reimbursements from employers for work-related travel. (4-2-08) 12. Tribal Income. Income received from a tribe for any purpose other than direct wages. (4-2-08) 13. Foster Parents' Income. Income of licensed foster parents is excluded when determining eligibility for a foster child. Income is counted when determining eligibility for the foster parent's own child(ren). (4-2-08) 14. Adoption Assistance. Adoption assistance payments are excluded from income. (4-2-08) 15. Temporary Census Income. All wages paid by the Census Bureau for temporary employment related to U.S. Census activities are excluded for a time period not to exceed six (6) months during the regularly scheduled ten-year U.S. Census. (4-7-11) 16. Office of Refugee Resettlement Assistance. (4-4-13) 17. Workforce Investment Act (WIA) Benefits or Workforce Innovation and Opportunity Act (WIOA) Benefits. (3-2-17) 073. INCOME DEDUCTIONS. Court-ordered child support payments made by a parent who receives child care benefits are deducted from income when determining eligibility. The actual amount paid and the amount of the legal obligation for child support must be verified. (3-2-17)

- ii. Is sufficient to accommodate increases in family income over time that are typical for low-income workers and that promote and support family economic stability: **The second eligibility of 150% FPL allows for opportunity for job growth and advancement while maintaining continuity of care.**
- iii. Reasonably allows a family to continue accessing child care services without unnecessary disruption: **Increases in household income are not acted on until redetermination period unless income exceeds 85 percent of SMI.**
- iv. Provide the citation for this policy or procedure: **16.06.12.170.03**

☐ Other. Identify and describe the components that are still pending per the instructions on *CCDF Plan Response Options for Areas Where Implementation Is Still in Progress* in the introduction.

b) To help families transition from assistance, does the Lead Agency gradually adjust copays for families eligible under the graduated phase-out period?

☒ No

☐ Yes

- i. If yes, describe how the Lead Agency gradually adjusts copays for families under a graduated phase-out.
- ii. If yes, does the Lead Agency require additional reporting requirements during the graduated phase-out period? (Note: Additional reporting requirements are also discussed in section 3.3.3 of the Plan.)

☐ No.

☐ Yes. Describe:

3.1.8 Fluctuation in earnings.

Lead Agencies are required to demonstrate how their processes for initial determination and redetermination take into account irregular fluctuations in earnings (658E(c)(2)(N)(i)(II)). The Lead Agency must put in place policies that ensure that temporary increases in income, including temporary increases that can result in a monthly income exceeding 85 percent of SMI (calculated on a monthly basis) from seasonal employment or other temporary work schedules, do not affect eligibility or family co-payments (98.21(c)). **Check the processes, if applicable, that the Lead Agency uses to take into account irregular fluctuations in earnings and describe, at a minimum, how temporary increases that result in a monthly income exceeding 85 percent of SMI (calculated on a monthly basis) do not affect eligibility or family co-payments.**

- ☒ **Average the family's earnings over a period of time (i.e., 12 months). Describe:**
- IDAPA 16.06.12.076-.077. PROJECTING MONTHLY INCOME.** Income is projected for each month. Past income may be used to project future income. Changes expected during the certification period must be considered. Criteria for projecting monthly income is listed below:
- 01. Income Already Received.** Count income already received by the household during the month. If the actual amount of income from any pay period is known, use the actual pay period amounts to determine the total month's income. Convert the actual income to a monthly amount if a full month's income has been received or is expected to be received. If no changes are expected, use the known actual pay period amounts for the past thirty (30) days to project future income.
- 02. Anticipated Income.** Count income the household and the Department believe the household will get during the remainder of the certification period. If the income has not changed and no changes are anticipated, use the income received in the past thirty (30) days as one indicator of anticipated income. If changes in income have occurred or are anticipated, past income cannot be used as an indicator of anticipated income. If income changes and income received in the past thirty (30) days does not reflect anticipated income, the Department can use the household income received over a longer period to anticipate income. If income changes seasonally, the Department can use the household income from the last season, comparable to the certification period, to anticipate income.
- a. Full Month's Income.** If income will be received for all regular pay dates in the month, it is considered a full month of income.
- b.** If income will not be received for all regular pay dates in the month, it is not considered a full month of income and it is not converted.
- c. Income Paid on Salary.** Income received on salary, rather than an hourly wage, is counted at the expected monthly salary rate.
- d. Income Paid at Hourly Rate.** Compute anticipated income paid on an hourly basis by multiplying the hourly pay by the expected number of hours the client will work in the pay period. Convert the pay period amount to a monthly amount.
- e. Fluctuating Income.** When income fluctuates each pay period and the rate of pay remains the same, average the income from the past thirty (30) days to determine the average pay period amount. Convert the average pay period amount to

a monthly amount. 16.06.12.077. CONVERTING INCOME TO A MONTHLY AMOUNT. If a full month's income is expected, but is received on other than a monthly basis, convert the income to a monthly amount using one of the formulas below: 01. Weekly Amount. Multiply weekly amounts by four point three (4.3). 02. Bi-Weekly Amount. Multiply bi-weekly amounts by two point one five (2.15). 03. Semi-Monthly Amount. Multiply semi-monthly amounts by two (2). 04. Monthly Amount. Use the exact monthly income if it is expected for each month of the certification period.

- ☐ Request earning statements that are most representative of the family's monthly income. Describe:
- ☐ Deduct temporary or irregular increases in wages from the family's standard income level. Describe:
- ☐ Other. Describe:

3.1.9 Lead Agencies are required to have procedures for documenting and verifying that children receiving CCDF funds meet eligibility criteria at the time of eligibility determination and redetermination (98.68(c)). Lead Agencies should note that there are no federal requirements for specific documentation or verification procedures. Check the information that the Lead Agency documents and verifies and describe, at a minimum, what information is required and how often. Check all that apply.

- ☒ Applicant identity. Describe: For all benefits programs, identity verification is required only once, unless later information raises a question about the individual's identity. Idaho has an automated verification system that is used by SNAP and Medicaid program workers called e-Verif I. This system interfaces with other systems such as vital statistics, Social Security, Dept. of Labor, Child Support, and other automated systems that is used to verify income and identity of all family members. (Benefits Process Manual: "Verifying Identity")
- ☒ Applicant's relationship to the child. Describe: Household declaration on the application or with information in other benefit systems.
- ☒ Child's information for determining eligibility (e.g., identity, age, citizen/immigration status). Describe: For all benefits programs, identity verification is required only once, unless later information raises a question about the individual's identity. Idaho has an automated verification system that is used by SNAP and Medicaid program workers called e-Verif I. This system interfaces with other systems such as vital statistics, Social Security, Dept. of Labor, Child Support, and other automated systems that is used to verify income and identity of all family members. (Benefits Process Manual: "Verifying Identity")
- ☒ Work. Describe: Qualifying activities are verified with a school schedule, training schedule, and/or most recent 30 days of wages and working hours. Activities are verified every 12 months with scanned copies of all verifications stored in eCase. Verifications will be requested after 12 months, or if a change is reported by the client. For foster children, staff in the Division of Family and Community Services

(FACS) verify a foster parent's activity hours. Unless a discrepancy is found, child care eligibility staff do not request additional verifications.

- ☒ Job training or educational program. Describe: **Qualifying activities are verified with a school schedule, training schedule, and/or most recent 30 days of wages and working hours. Activities are verified every 12 months with scanned copies of all verifications stored in eCase. Verifications will be requested after 12 months, or if a change is reported by the client. For foster children, staff in the Division of Family and Community Services (FACS) verify a foster parent's activity hours. Unless a discrepancy is found, child care eligibility staff do not request additional verifications.**
- ☒ Family income. Describe: **Family income is verified with most recent pay records and/or wage stubs, work verification forms completed by the employer, employer statements verifying income, collateral contacts, self-employment documents such as tax returns, and/or the Work Number. Income is verified every 12 months with scanned copies of all verifications stored in eCase. For foster children, household income is not counted.**
- ☒ Household composition. Describe: **Household declaration on the application or with information in comprehensive benefit systems.**
- ☒ Applicant residence. Describe: **Household declaration on the application or with information in other benefit systems. For foster children, staff in the Division of Family and Community Services (FACS) verify a foster family's residence. Unless a discrepancy is found, child care eligibility staff do not request additional verifications.**
- ☐ Other. Describe:

3.1.10 Which strategies, if any, will the Lead Agency use to assure the timeliness of eligibility determinations upon receipt of applications?

- ☒ Time limit for making eligibility determinations. Describe length of time: **30 days maximum. IDAPA 16.06.12.050**
- ☒ Track and monitor the eligibility determination process
- ☐ Other. Describe:
- ☐ None

3.1.11 Informing parents who receive TANF benefits about the exception to the individual penalties associated with the TANF work requirement.

Lead Agencies are required to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child younger than age 6 (98.16(v); 98.33(f)).

Lead Agencies must coordinate with TANF programs to ensure that TANF families with young children will be informed of their right not to be sanctioned if they meet the criteria set forth by the state/territory TANF agency in accordance with Section 407(e)(2) of the Social Security Act.

In fulfilling this requirement, the following criteria or definitions are applied by the TANF agency to determine whether the parent has a demonstrated inability to obtain needed child care.

Note: The TANF agency, not the CCDF Lead Agency, is responsible for establishing the following criteria or definitions. These criteria or definitions are offered in this Plan as a matter of public record.

- a) Identify the TANF agency that established these criteria or definitions:
Idaho Department of Health and Welfare
- b) Provide the following definitions established by the TANF agency:
 - “Appropriate child care”: **Appropriate child care is not available within a reasonable distance from the participant's home or work site. (IDAPA: 16.03.08.163) Exceptions will be made on a case-by-case basis by a reasonable person concept. Reasonable person is defined as a person whose conduct would be that of a reasonably prudent person in the same or similar circumstances.**
 - “Reasonable distance”: **Appropriate child care is not available within a reasonable distance from the participant's home or work site. (IDAPA: 16.03.08.163) Exceptions will be made on a case-by-case basis by a reasonable person concept. Reasonable person is defined as a person whose conduct would be that of a reasonably prudent person in the same or similar circumstances.**
 - “Unsuitability of informal child care”: **Informal child care by relatives or others is not available or is unsuitable. (IDAPA: 16.03.08.163) Exceptions will be made on a case-by-case basis by a reasonable person concept. Reasonable person is defined as a person whose conduct would be that of a reasonably prudent person in the same or similar circumstances.**
 - “Affordable child care arrangements”: **Exceptions will be made on a case-by-case basis by a reasonable person concept. Reasonable person is defined as a person whose conduct would be that of a reasonably prudent person in the same or similar circumstances.**
- c) How are parents who receive TANF benefits informed about the exception to the individual penalties associated with the TANF work requirements?
 - ☒ In writing
 - ☒ Verbally
 - ☐ Other. Describe:
- d) Provide the citation for the TANF policy or procedure:
<https://adminrules.idaho.gov/rules/current/16/160308.pdf>

3.2 Increasing Access for Vulnerable Children and Families

Lead Agencies are required to give priority for child care assistance to children with special needs, which can include vulnerable populations, in families with very low incomes and to children experiencing homelessness (658E(c)(3)(B); 98.46(a)). The prioritization of CCDF assistance services is not limited to eligibility determination (i.e., the establishment of a waiting list or the ranking of eligible families in priority order to be served).

Note: CCDF defines “child experiencing homelessness” as a child who is homeless, as defined in Section 725 of Subtitle VII-B of the McKinney-Vento Act (42 U.S.C. 11434a) (98.2).

3.2.1 Describe how the Lead Agency defines:

a) “Children with special needs”:

Special Needs. Any child with physical, mental, emotional, behavioral disabilities, or developmental delays identified on an Individual Education Plan (IEP) or an Individualized Family Service Plan (IFSP). (IDAPA:16.06.12.011.10.)

b) “Families with very low incomes” :

Families with very low incomes are families participating with Temporary Assistance for Families in Idaho (TAFI).

3.2.2 Describe how the Lead Agency will prioritize or target child care services for the following children and families.

a) Identify how services are prioritized for children with special needs. **Check all that apply:**

- ☐ Prioritize for enrollment
- ☐ Serve without placing these populations on waiting lists
- ☐ Waive co-payments
- ☐ Pay higher rates for access to higher quality care
- ☐ Use grants or contracts to reserve slots for priority populations
- ☒ Other. Describe:

Children with a verified special need may qualify for in-home care (care provided in their home), and may remain eligible for child care subsidies until the month of their nineteenth birthday. (IDAPA: 16.06.12.105.03 and 16.06.12400.02.c.)

b) Identify how services are prioritized for families with **very** low incomes. **Check all that apply:**

- ☐ Prioritize for enrollment
- ☐ Serve without placing these populations on waiting lists
- ☒ Waive co-payments
- ☐ Pay higher rates for access to higher quality care
- ☐ Use grants or contracts to reserve slots for priority populations
- ☒ Other. Describe:

Participation with the Temporary Assistance for Families in Idaho (TAFI) program is a qualifying activity. TAFI families are not required to pay a copay; they receive the entire Local Market Rate for which they are eligible.

c) Identify how services are prioritized for children experiencing homelessness, as defined by the CCDF. **Check all that apply:**

- ☐ Prioritize for enrollment

- ☐ Serve without placing these populations on waiting lists
- ☐ Waive co-payments
- ☐ Pay higher rates for access to higher quality care
- ☐ Use grants or contracts to reserve slots for priority populations
- ☒ Other. Describe: **IDHW has created a verification form and trained community partners on the process for which a customer provides the Child Care Activity form showing that they customer is participating in a work or training program offered by a community agency or homeless shelter, for which then child care is approved. Community Agencies work with the family and only notify IDHW when the customer ends the program.**

d) Identify how services are prioritized, if applicable, for families receiving TANF program funds, those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF (98.16(i)(4)). **Check all that apply:**

- ☐ Prioritize for enrollment
- ☐ Serve without placing these populations on waiting lists
- ☒ Waive co-payments
- ☐ Pay higher rates for access to higher quality care
- ☐ Use grants or contracts to reserve slots for priority populations
- ☒ Other. Describe: **Participation with the Temporary Assistance for Families in Idaho (TAFI) program is a qualifying activity. TAFI families are not required to pay a copay; they receive the entire Local Market Rate for which they are eligible.**

3.2.3 List and define any other priority groups established by the Lead Agency. **None**

3.2.4 Describe how the Lead Agency prioritizes services for the additional priority groups identified in 3.2.3. **N/A**

3.2.5 Lead Agencies are required to expend CCDF funds to (1) permit the enrollment (after an initial eligibility determination) of children experiencing homelessness while required documentation is obtained, (2) provide training and TA to child care providers and the appropriate Lead Agency (or designated entity) staff on identifying and serving children and families experiencing homelessness (addressed in section 6), and (3) conduct specific outreach to families experiencing homelessness(658E(c)(3); 98.51).

- a) Describe the procedures to permit the enrollment of children experiencing homelessness while required documentation is obtained. **IDHW Self Reliance Specialists gather and record information for child care to process applications. For families experiencing homelessness, community partners/agencies must provide families with the child care activity form showing that the family is participating in a work or training program offered by a partner or agency for which allows approval of child care.**
- b) Check, where applicable, the procedures used to conduct outreach for children experiencing homelessness (as defined by CCDF Rule) and their families.

- ☐ Lead Agency accepts applications at local community-based locations
- ☐ Partnerships with community-based organizations
- ☒ Partnering with homeless service providers, McKinney-Vento liaisons, and others who work with families experiencing homelessness to provide referrals to child care
- ☐ Other: _____

Note: The Lead Agency shall pay any amount owed to a child care provider for services provided as a result of the initial eligibility determination, and any CCDF payment made prior to the final eligibility determination shall not be considered an error or improper payment (98.51(a)(1)(ii)).

3.2.6 Lead Agencies must establish a grace period that allows children experiencing homelessness and children in foster care to receive CCDF assistance while providing their families with a reasonable time to take any necessary actions to comply with immunization and other health and safety requirements (as described in section 5). The length of such a grace period shall be established in consultation with the state, territorial, or tribal health agency (658E(c)(2)(I)(i)(I); 98.41(a)(1)(i)(C)).

Note: Any payment for such a child during the grace period shall not be considered an error or improper payment (98.41(a)(1)(i)(C)(2)).

- a) Describe procedures to provide a grace period to comply with immunization and other health and safety requirements, including how the length of the grace period was established in consultation with the state, territorial, or tribal health agency for:
 - Children experiencing homelessness (as defined by the **Lead Agency's** CCDF Rule). **Immunization policies allow all children to receive care for a reasonable amount of time prior to completing immunization requirements.**
Provide the citation for this policy and procedure. **IDAPA: 16.06.12.105.01**
 - Children who are in foster care. _____
Provide the citation for this policy and procedure. _____
- b) Describe how the Lead Agency coordinates with licensing agencies and other relevant state, territorial, tribal, and local agencies to provide referrals and support to help families with children receiving services during a grace period comply with immunization and other health and safety requirements (98.41(a)(1)(i)(C)(4)). _____
- c) Does the Lead Agency establish grace periods for other children who are not experiencing homelessness or in foster care?
 - ☒ No
 - ☐ Yes. Describe: _____

3.3 Protection for Working Families

3.3.1 12-Month eligibility.

The Lead Agency is required to establish a minimum 12-month eligibility and redetermination period, regardless of changes in income (as long as the income does not exceed the federal threshold of 85 percent of the state median income) or temporary changes in participation in work, training, or educational activities (658E(c)(2)(N)(i) and (ii)).

This change means that a Lead Agency may not terminate CCDF assistance during the 12-month period if a family has an increase in income that exceeds the state's income eligibility threshold, but not the federal threshold of 85 percent of SMI. The Lead Agency may not terminate assistance prior to the end of the 12-month period if a family experiences a temporary job loss or a temporary change in participation in a training or educational activity. A temporary change in eligible activity includes, at a minimum, any time-limited absence from work for an employed parent due to such reasons as the need to care for a family member or an illness; any interruption in work for a seasonal worker who is not working; any student holiday or break for a parent participating in a training or educational program; any reduction in work, training, or education hours, as long as the parent is still working or attending a training or educational program; any other cessation of work or attendance at a training or educational program that does not exceed 3 months or a longer period of time established by the Lead Agency; a child turning 13 years old during the 12-month eligibility period (**except as described in 3.1.1**); and any changes in residency within the state, territory, or tribal service area.

- a) Describe the Lead Agency's policies and procedures in implementing the minimum 12-month eligibility and redetermination requirements, including when a family experiences a temporary change in activity. **IDAPA 16.06.12.602.01: Redetermination. The Department must redetermine eligibility for child care benefits at least every twelve (12) months.**
- b) How does the Lead Agency define "temporary change?" **A change lasting no longer than one calendar month.**
- c) Provide the citation for this policy and/or procedure. **IDAPA 16.06.12.505. INTERIM CHILD CARE PAYMENT. If child care arrangements would otherwise be lost, child care may be paid when a child temporarily stops attending child care for no longer than (1) calendar month and plans to return. IDAPA 16.06.12.600. CHANGE REPORTING REQUIREMENTS. A family who receives child care benefits must report the following permanent changes by the tenth day of the month following the month in which the change occurred. 01. Change in Full-time or Part-time Activity Hours. 02. Change in Permanent Address. 03. Change in Household Composition. 04. Change in Income. When the household's total gross income exceeds the income limit for the program, as described the higher of either one hundred and thirty percent (130%) of the Federal Poverty Guidelines (FPG) or eighty-five percent (85%) of the State Median Income (SMI) for a family of the same size. 05. Change in Child Care Provider.**

3.3.2 Lead Agency's option to discontinue assistance during the 12-month eligibility period.

Lead Agencies have the option, but are not required, to discontinue assistance during the 12-month eligibility period due to a parent's *non-temporary* loss of work or cessation of attendance at a job training or educational program, otherwise known as a parent's eligible activity.

If the Lead Agency chooses the option to discontinue assistance due to a parent's *non-temporary* loss or cessation of eligible activity, it must continue assistance at least at the same level for a period of not fewer than 3 months after each such loss or cessation. This time period allows the parent to engage in a job search and to resume work or resume attendance in a job training or educational program. At the end of the minimum 3-month period of continued assistance, if the parent has engaged in a qualifying work, training, or educational program activity with an income below 85 percent of SMI, assistance cannot be terminated, and the child

must continue receiving assistance until the next scheduled redetermination or, at the Lead Agency option, for an additional minimum 12-month eligibility period.

- a) Does the Lead Agency discontinue assistance during the 12-month eligibility period due to a parent's non-temporary loss or cessation of eligible activity and offer a minimum 3-month period to allow parents to engage in a job search and to resume participation in an eligible activity?
- ☐ No, the state/territory does not allow this option to discontinue assistance during the 12-month eligibility period due to a parent's *non-temporary* loss of work or cessation of attendance at a job training or educational program.
 - ☒ Yes, the Lead Agency discontinues assistance during the 12-month eligibility period due to a parent's *non-temporary* loss of work or cessation of eligible activity and provides a minimum 3-month period of job search. If yes:
 - i. Provide a summary describing the Lead Agency's policies and procedures for discontinuing assistance due to a parent's non-temporary change:
An eligible family who loses or ceases its qualifying activity, may continue to receive assistance for up to three (3) months to engage in a job search and resume work, or resume attendance at a job training or educational program.
 - ii. Describe what specific actions/changes trigger the job-search period.
Losing or ceasing a qualifying activity triggers the job-search period.
 - iii. How long is the job-search period (must be at least 3 months)? **3 months**
 - iv. Provide the citation for this policy or procedure.
IDAPA 16.06.12.202. CESSATION OF QUALIFYING ACTIVITIES. An eligible family who loses or ceases its qualifying activity, may continue to receive assistance for up to three (3) months to engage in a job search and resume work, or resume attendance at a job training or educational program.
- b) The Lead Agency may discontinue assistance prior to the next 12-month redetermination in the following limited circumstances. Check and describe any circumstances in which the Lead Agency chooses to discontinue assistance prior to the next 12-month redetermination. Check all that apply.
- ☐ Not applicable
 - ☐ Excessive unexplained absences despite multiple attempts by the Lead Agency or designated entity to contact the family and provider, including the prior notification of a possible discontinuation of assistance.
 - i. Define the number of unexplained absences identified as excessive:
 - ii. Provide the citation for this policy or procedure:
 - ☒ A change in residency outside of the state, territory, or tribal service area. Provide the citation for this policy or procedure: **IDAPA 16.06.12.102 RESIDENCY. The family must live in the state of Idaho, and have no immediate intention of leaving**
 - ☒ Substantiated fraud or intentional program violations that invalidate prior determinations of eligibility. Describe the violations that lead to discontinued

assistance and provide the citation for this policy or procedure. **IDAPA 16.06.12. 702. INTENTIONAL PROGRAM VIOLATIONS (IPV).** An IPV is an intentionally false or misleading action or statement as identified below in Subsections 702.01 through 702.08 of this rule. An IPV is established when a family member or the child care provider admits the IPV in writing and waives the right to an administrative hearing, or when determined by an administrative hearing, a court decision, or through deferred adjudication. Deferred adjudication exists when the court defers a determination of guilt because the accused family member or child care provider meets the terms of a court order or an agreement with the prosecutor. **01. False Statement.** An individual makes a false statement to the Department, either orally or in writing, in order to participate in the Idaho Child Care Program. **02. Misleading Statement.** An individual makes a misleading statement to the Department, either orally or in writing, to participate in the Idaho Child Care Program. **03. Misrepresentation of Fact.** An individual misrepresents one (1) or more facts to the Department, either orally or in writing, to participate in the Idaho Child Care Program. **04. Concealing Fact.** An individual conceals or withholds one (1) or more facts to participate in the Idaho Child Care Program. **05. Non-Compliance With Rules and Regulations.** An individual fails repeatedly or substantially to comply with this chapter of rules. **06. Violation of Provider Agreement.** An individual knowingly violates any term of his provider agreement. **07. Failure to Meet Qualifications.** A provider fails to meet the qualifications specifically required by this chapter of rules or by any applicable licensing board. **IDAPA 16.06.12.703. PENALTIES FOR AN IPV.** When the Department determines an IPV was committed, the party who committed the IPV loses eligibility for ICCP. If an individual has committed an IPV, the entire family is ineligible for child care benefits. If a child care provider has committed an IPV, the provider is ineligible to receive payments. The period of ineligibility for each offense, for both participants and providers, is as follows: **01. First Offense.** Twelve (12) months, for the first IPV or fraud offense, or the length of time specified by the court. **02. Second Offense.** Twenty-four (24) months for the second IPV or fraud offense, or the length of time specified by the court. **03. Third Offense.** Permanent ineligibility for the third or subsequent IPV or fraud offense, or fraud offense, or the length of time specified by court.

3.3.3 Change reporting during the 12-month eligibility period.

The Lead Agency must describe the requirements for parents to report changes in circumstances during the 12-month eligibility period and describe efforts to ensure that such requirements do not place an undue burden on eligible families, which could impact the continuity of care for children and stability for families receiving CCDF services (98.16(h)(1)).

Note: Responses should exclude reporting requirements for a graduated phase-out, which were described in question 3.1.7(b).

Families are required to report a change to the Lead Agency at any time during the 12-month eligibility period if the family's income exceeds 85 percent of the state median income, taking into account irregular fluctuations in income (98.21(e)(1)). If the Lead Agency chooses the option to terminate assistance, as described in section 3.3.2 of the Plan, they may require families to report a non-temporary change (as described in section 3.3.3 of the Plan) in work, training or educational activities (otherwise known as a parent's eligible activity).

- a) Does the Lead Agency require families to report a non-temporary change in a parent's eligible activity?

- ☐ No
☒ Yes

- b) Any additional reporting requirements during the 12-month eligibility period must be limited to items that impact a family's eligibility (e.g., income changes over 85 percent of SMI) or that impact the Lead Agency's ability to contact the family or pay the child care providers (e.g., a family's change of address, a change in the parent's choice of child care provider).

Check and describe any additional reporting requirements required by the Lead Agency during the 12-month eligibility period. Check all that apply.

- ☒ Additional changes that may impact a family's eligibility during the 12-month period. Describe: **IDAPA 16.6.12.600. CHANGE REPORTING REQUIREMENTS. A family who receives child care benefits must report the following permanent changes by the tenth day of the month following the month in which the change occurred. 01. Change in Full-time or Part-time Activity Hours. 02. Change in Permanent Address. 03. Change in Household Composition. 04. Change in Income. When the household's total gross income exceeds the income limit for the program, as described the higher of either one hundred and thirty percent (130%) of the Federal Poverty Guidelines (FPG) or eighty-five percent (85%) of the State Median Income (SMI) for a family of the same size.**
- ☒ Changes that impact the Lead Agency's ability to contact the family. Describe: **IDAPA 16.6.12.600. CHANGE REPORTING REQUIREMENTS. A family who receives child care benefits must report the following permanent changes by the tenth day of the month following the month in which the change occurred. 02. Change in Permanent Address.**
- ☒ Changes that impact the Lead Agency's ability to pay child care providers. Describe: **IDAPA 16.6.12.600. CHANGE REPORTING REQUIREMENTS. A family who receives child care benefits must report the following permanent changes by the tenth day of the month following the month in which the change occurred. 01. Change in Full-time or Part-time Activity Hours. 02. Change in Permanent Address. 03. Change in Household Composition. 04. Change in Income. When the household's total gross income exceeds the income limit for the program, as described the higher of either one hundred and thirty percent (130%) of the Federal Poverty**

Guidelines (FPG) or eighty-five percent (85%) of the State Median Income (SMI) for a family of the same size. 05. Change in Child Care Provider.

Any additional reporting requirements that the Lead Agency chooses, as its option to require from parents during the 12-month eligibility period, shall not require an office visit. In addition, the Lead Agency must offer a range of notification options to accommodate families.

- c) How does the Lead Agency allow families to report changes to ensure that reporting requirements are not burdensome and to avoid an impact on continued eligibility between redeterminations? Check all that apply.

- ☒ Phone
- ☒ Email
- ☒ Online forms
- ☐ Extended submission hours
- ☒ Postal Mail
- ☒ Fax
- ☒ In-person submission
- ☐ Other. Describe:

- d) Families must have the option to voluntarily report changes on an ongoing basis during the 12-month eligibility period.

Lead Agencies are required to act on information reported by the family if it will reduce the family's co-payment or increase the family's subsidy. Lead Agencies are prohibited from acting on information reported by the family that would reduce the family's subsidy unless the information reported indicates that the family's income exceeds 85 percent of SMI after considering irregular fluctuations in income or, at the option of the Lead Agency, the family has experienced a non-temporary change in eligible activity.

- i. Describe any other changes that the Lead Agency allows families to report. **Families may report permanent changes at anytime during their eligibility period.**
- ii. Provide the citation for this policy or procedure. **IDAPA 16.6.12.600. CHANGE REPORTING REQUIREMENTS. A family who receives child care benefits must report the following permanent changes by the tenth day of the month following the month in which the change occurred. 01. Change in Full-time or Part-time Activity Hours. 02. Change in Permanent Address. 03. Change in Household Composition. 04. Change in Income. When the household's total gross income exceeds the income limit for the program, as described the higher of either one hundred and thirty percent (130%) of the Federal Poverty Guidelines (FPG) or eighty-five percent (85%) of the State Median Income (SMI) for a family of the same size. 05. Change in Child Care Provider.**

3.3.4 Prevent the disruption of employment, education, or job training activities.

Lead Agencies are required to have procedures and policies in place to ensure that parents (especially parents receiving assistance under the TANF program) are not required to unduly disrupt their employment, education, or job training activities to comply with the Lead Agency's

or designated local entity's requirements for the redetermination of eligibility for assistance (658E(c)(2)(N)(ii); 98.21(d)).

Examples include developing strategies to inform families and their providers of an upcoming redetermination and the information that will be required of the family, pre-populating subsidy renewal forms, having parents confirm that the information is accurate, and/or asking only for the information necessary to make an eligibility redetermination. In addition, states and territories can offer a variety of family-friendly methods for submitting documentation for eligibility redetermination that considers the range of needs for families in accessing support (e.g., use of languages other than English, access to transportation, accommodation of parents working non-traditional hours).

a) Identify, where applicable, the Lead Agency's procedures and policies to ensure that parents (especially parents receiving TANF program funds) do not have their employment, education, or job training unduly disrupted to comply with the state/territory's or designated local entity's requirements for the redetermination of eligibility.

- ☒ Advance notice to parents of pending redetermination
- ☒ Advance notice to providers of pending redetermination
- ☒ Pre-populated subsidy renewal form
- ☒ Online documentation submission
- ☒ Cross-program redeterminations
- ☐ Extended office hours (evenings and/or weekends)
- ☒ Other: **At the clients' request DHW staff may make collateral phone calls to relevant verifiers to avoid requesting additional documentation or verifications.**

b) How are families allowed to submit documentation, described in 3.1.9, for redetermination? Check all that apply.

- ☒ Postal Mail
- ☒ Email
- ☒ Online forms
- ☒ Fax
- ☒ In-person
- ☐ Extended submission hours
- ☐ Other. Describe:

3.4 Family Contribution to Payments

Lead Agencies are required to establish and periodically revise a sliding-fee scale for CCDF families that varies based on income and the size of the family to determine each family's contribution (i.e., co-payment) that is not a barrier to families receiving CCDF funds (658E(c)(5)). In addition to income and the size of the family, the Lead Agency may use other factors when

determining family contributions/co-payments. Lead Agencies, however, may NOT use cost of care or amount of subsidy payment in determining co-payments (98.45(k)(2)).

Note: To help families transition off child care assistance, Lead Agencies may gradually adjust co-pay amounts for families determined to be eligible under a graduated phase-out. However, section 3.4 applies *only* to families in their initial/entry eligibility period. See section 3.1.7 Graduated Phase-Out regarding co-pays during the graduated phase-out period.

3.4.1 Provide the CCDF co-payments in the chart below according to family size for one child in care.

- a) Fill in the chart based on the most populous area of the State (area serving highest number of CCDF children).

	(a)	(b)	(c)	(d)	(e)	(f)
Family Size	Lowest Initial or First Tier Income Level Where Family Is First Charged Co-Pay (Greater Than \$0)	What Is the Monthly Co-Payment for a Family of This Size Based on the Income Level in (a)?	The Co-Payment in Column (b) is What Percentage of the Income in Column (a)?	Highest Initial or First Tier Income Level Before a Family Is No Longer Eligible	What Is the Monthly Co-Payment for a Family of This Size Based on the Income Level in (d)?	The Co-Payment in Column (e) is What Percentage of the Income in Column (d)?
1	N/A	N/A	N/A	N/A	N/A	N/A
2	\$0	\$20/ \$40/ \$75/ \$150	\$	\$1760	\$150	8.5%
3	\$0	\$20/ \$40/ \$75/ \$150	\$	\$2213	\$150	6.8%
4	\$0	\$20/ \$40/ \$75/ \$150	\$	\$2665	\$150	5.6%
5	\$0	\$20/ \$40/ \$75/ \$150	\$	\$3118	\$150	4.8%

- b) What is the effective date of the sliding-fee scale(s)? **October 1, 2017**

- c) Identify the most populous area of the state used to complete the chart above. **Sliding fee scales are shared statewide. The most populous area of the State is the City of Boise.**

d) Provide the link to the sliding-fee scale:

<http://healthandwelfare.idaho.gov/Portals/0/FoodCashAssistance/CashAssistance/ICCPCoPayChart.pdf>

e) If the sliding-fee scale is not statewide, describe how many jurisdictions set their own sliding-fee scale (98.16(i)(3)). **Sliding fee scales are shared statewide.**

3.4.2 How will the family's contribution be calculated, and to whom will it be applied? Check all that apply.

☒ The fee is a dollar amount and:

☒ The fee is per child, with the same fee for each child.

☐ The fee is per child and is discounted for two or more children.

☐ The fee is per child up to a maximum per family.

☐ No additional fee is charged after certain number of children.

☐ The fee is per family.

☐ The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1). Describe:

☐ Other. Describe:

☐ The fee is a percent of income and:

☐ The fee is per child, with the same percentage applied for each child.

☐ The fee is per child, and a discounted percentage is applied for two or more children.

☐ The fee is per child up to a maximum per family.

☐ No additional percentage is charged after certain number of children.

☐ The fee is per family.

☐ The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1). Describe:

☐ Other. Describe:

3.4.3 Does the Lead Agency use other factors in addition to income and family size to determine each family's co-payment (658E(c)(3)(B))? Reminder – Lead Agencies may NOT use cost of care or amount of subsidy payment in determining co-payments (98.45(k)(2)).

☒ No

☐ Yes. If yes, check and describe those additional factors below.

☐ Number of hours the child is in care. Describe:

☐ Lower co-payments for a higher quality of care, as defined by the state/territory. Describe:

☐ Other. Describe:

3.4.4 The Lead Agency may waive contributions/co-payments from families whose incomes are at or below the poverty level for a family of the same size (98.45(k)) or for families who are receiving or needing to receive protective services, as determined for purposes of CCDF eligibility, or who meet other criteria established by the Lead Agency (98.45(k)(4)). Does the Lead Agency waive family contributions/co-payments for any of the following? Check all that apply.

- ☐ No, the Lead Agency does not waive family contributions/co-payments.
- ☒ Yes, the Lead Agency waives family contributions/co-payments for families with an income at or below the Federal poverty level for families of the same size.
- ☒ Yes, the Lead Agency waives family contributions/co-payments for families who are receiving or needing to receive protective services, as determined by the Lead Agency for purposes of CCDF eligibility. Describe the policy and provide the policy citation.
IDAPA 16.06.12 COPAYMENTS. Eligible families, except TAFI families participating in non-employment TAFI activities and guardians of foster children, must pay part of their child care costs. Providers are responsible for ensuring families pay the determined child care costs and must not waive these costs. .
- ☐ Yes, the Lead Agency waives family contributions/co-payments for other criteria established by the Lead Agency. Describe the policy and provide the policy citation.
 .

4 Ensure Equal Access to Child Care for Low-Income Children

A core purpose of CCDF is to promote parental choice and to empower working parents to make their own decisions regarding the child care services that best suit their family's needs. Parents have the option to choose from center-based care, family child care or care provided in the child's own home. In supporting parental choice, the Lead Agencies must ensure that families receiving CCDF funding have the opportunity to choose from the full range of eligible child care settings and must provide families with equal access to child care that is comparable to that of non-CCDF families. Lead Agencies must employ strategies to increase the supply and to improve the quality of child care services, especially in underserved areas. This section addresses strategies that the Lead Agency uses to promote parental choice, ensure equal access, and increase the supply of child care. **Note: In responding to questions in this section, the Office of Child Care (OCC) recognizes that each State/Territory identifies and defines its own categories and types of care. The OCC does not expect States/Territories to change their definitions to fit the CCDF-defined categories and types of care. For these questions, provide responses that closely match the CCDF categories of care.**

4.1 Parental Choice in Relation to Certificates, Grants, or Contracts

The parent(s) of each eligible child who receive(s) or is offered financial assistance for child care services has the option of either receiving a child care certificate or, if available, enrolling his or her child with a provider that has a grant or contract for providing child care services (658E(c)(2)(A); 98.30(a)). Even if a parent chooses to enroll his or her child with a provider who has a grant or contract, the parent will select the provider, to the extent practicable. If a parent chooses to use a certificate, the Lead Agency shall provide information to the parent on the range of provider options, including care by sectarian providers and relatives. Lead Agencies must require providers chosen by families to meet health and safety standards and has the option to require higher standards of quality. Lead agencies are reminded that any policies and procedures should not restrict parental access to any type of care or provider (e.g. center care, home care, in-home care, for-profit provider, non-profit provider or faith-based provider, etc.) (98.15 (a)(5)).

4.1.1 Describe the child care certificate, including when it is issued to parents (before or after the parent has selected a provider) and what information is included on the certificate (98.16 (q)). DHW conducts 'Informed Choice Interviews' with families who come into local offices to apply for services. During these interviews, families are provided information that they can use to make decisions regarding services. For child care specifically, families are referred to IdahoSTARS to search for an ICCP provider. Eligible parents may choose among the following types of child care providers available under ICCP: 01. Child Care Center. A child care center cares for thirteen (13) or more children. 02. Group Child Care. Group child care is for seven (7) to twelve (12) children. 03. Family Child Care. Family child care is for six (6) or fewer children. 04. Relative Child Care. Relative child care is for six (6) or fewer related children. 05. In-Home Child Care. In-home child care is provided by a relative or non-relative in the home of the child. Eligibility for in-home child care is determined in accordance with Section 400 of Rules Governing the Idaho Child Care Program. (IDAPA: 16.06.12.101)

4.1.2 Describe how the parent is informed that the child certificate allows the option to choose from a variety of child care categories, such as private, not-for-profit, faith-based providers; centers; FCC homes; or in-home providers (658E(c)(2)(A)(i); 658P(2); 658Q). Check all that apply.

- ☐ Certificate that provides information about the choice of providers
- ☐ Certificate that provides information about the quality of providers
- ☒ Certificate not linked to a specific provider, so parents can choose any provider
- ☒ Consumer education materials on choosing child care
- ☐ Referral to child care resource and referral agencies
- ☐ Co-located resource and referral in eligibility offices
- ☒ Verbal communication at the time of the application
- ☐ Community outreach, workshops, or other in-person activities
- ☐ Other. Describe:

4.1.3 Child care services available through grants or contracts.

a) In addition to offering certificates, does the Lead Agency provide child care services through grants or contracts for child care slots (658A(b)(1))? *Note:* Do not check "yes" if every provider is simply required to sign an agreement to be paid in the certificate program.

- ☒ No. If no, skip to 4.1.4.
- ☐ Yes, in some jurisdictions but not statewide. If yes, describe how many jurisdictions use grants or contracts for child care slots.
- ☐ Yes, statewide. If yes, describe:
 - i. How the Lead Agency ensures that parents who enroll with a provider who has a grant or contract have choices when selecting a provider:
 - ii. The type(s) of child care services available through grants or contracts:
 - iii. The entities that receive contracts (e.g., shared services alliances, CCR&R agencies, FCC networks, community-based agencies, child care providers):
 - iv. The process for accessing grants or contracts:

- v. How rates for contracted slots are set through grants and contracts:
- vi. How the Lead Agency determines which entities to contract with for increasing supply and/or improving quality:
- vii. If contracts are offered statewide and/or locally:

b) Will the Lead Agency use grants or contracts for child care services to increase the supply of specific types of care? Check all that apply.

- ☐ Programs to serve children with disabilities
- ☐ Programs to serve infants and toddlers
- ☐ Programs to serve school-age children
- ☐ Programs to serve children needing non-traditional hour care
- ☐ Programs to serve children experiencing homelessness
- ☐ Programs to serve children in underserved areas
- ☐ Programs that serve children with diverse linguistic or cultural backgrounds
- ☐ Programs that serve specific geographic areas
 - ☐ Urban
 - ☐ Rural
 - ☐ Other

c) Will the Lead Agency use grants or contracts for child care services to increase the quality of specific types of care? Check all that apply.

- ☐ Programs to serve children with disabilities
- ☐ Programs to serve infants and toddlers
- ☐ Programs to serve school-age children
- ☐ Programs to serve children needing non-traditional hour care
- ☐ Programs to serve children experiencing homelessness
- ☐ Programs to serve children in underserved areas
- ☐ Programs that serve children with diverse linguistic or cultural backgrounds
- ☐ Programs that serve specific geographic areas
 - ☐ Urban
 - ☐ Rural
 - ☐ Other

4.1.4 Certify by describing the Lead Agency's procedures for ensuring that parents have unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds (658E(c)(2)(B); 98.16(t)).

PARENT OR CARETAKER ACCESS TO CHILD CARE PREMISES. Providers serving families who receive a child care subsidy shall allow parents or caretakers unlimited access to their children and to persons giving care, except that access to children will not be required if prohibited by court order. (IDAPA: 16.06.12.807.) All ICCP participating child care providers must agree to and initial the following statement on their Idaho Child Care Program Provider Agreement: Section B, Item 9: *Unlimited Access to Premises— I and any other provider or individual living*

in my home or providing care at my facility will allow parents and guardians unlimited access to their child(ren) at all times when care is occurring. If a parent or guardian has been granted limited or has been denied visitation rights by a court of competent jurisdiction, and the daycare operator has written documentation from the court "UNLIMITED ACCESS TO PREMISES" does not confer a right to visitation upon that parent or guardian.

4.1.5 The Lead Agency must allow for in-home care (i.e., care provided in the child's own home) but may limit its use (98.16(i)(2)). Will the Lead Agency limit the use of in-home care in any way?

- ☐ No
- ☒ Yes. If checked, what limits will the Lead Agency set on the use of in-home care? Check all that apply.
 - ☒ Restricted based on minimum the number of children in the care of the provider to meet the Fair Labor Standards Act (minimum wage) requirements. Describe: **REQUIREMENTS FOR IN-HOME CARE UNDER ICCP. Parents must contact the Department to request approval of in-home child care. Only parents who have qualified activities outside their home will be considered for in-home care approval. The Department limits the approval of all in-home child care under ICCP to the following circumstances: 01. Three or More Children in the Home. There are three (3) or more ICCP eligible children in the home who are not in school at any time during the day and require child care. (IDAPA: 16.06.12.400.01.)**
 - ☒ Restricted based on the provider meeting a minimum age requirement. (A relative provider must be at least 18 years of age based on the definition of eligible child care provider (98.2). Describe: **Age of Provider. All child care providers providing services must be eighteen (18) years old or older. Persons sixteen (16) or seventeen (17) years old may provide child care if they have direct, on-site supervision from a licensed child care provider who is at least eighteen (18) years old. (IDAPA: 16.06.12.0802.01.)**
 - ☒ Restricted based on the hours of care (i.e., certain number of hours, non-traditional work hours). Describe: **REQUIREMENTS FOR IN-HOME CARE UNDER ICCP. Parents must contact the Department to request approval of in-home child care. Only parents who have qualified activities outside their home will be considered for in-home care approval. The Department limits the approval of all in-home child care under ICCP to the following circumstances: 02. Fewer Than Three Children in the Home. If there are fewer than three (3) children in the home who are eligible for ICCP and require child care, in-home care will be approved by the Department only when one (1) of the following special circumstances are met: a. Parents' qualifying activity occurs during times when out-of-home care is not available. If child care is needed during any period when out-of home care is not available, in-home care will be approved for the entire time care is needed. A family is not expected to change between out-of-home and in-home care. b. The family lives in an area where out-of-home care is not available. (IDAPA: 16.06.12.400.02.a.-b.)**
 - ☐ Restricted to care by relatives. Describe: _____
 - ☒ Restricted to care for children with special needs or a medical condition. Describe: **REQUIREMENTS FOR IN-HOME CARE UNDER ICCP. Parents must contact the Department to request approval of in-home child care. Only parents who have qualified activities outside their home will be considered for in-home care**

approval. The Department limits the approval of all in-home child care under ICCP to the following circumstances: **02. Fewer Than Three Children in the Home.** If there are fewer than three (3) children in the home who are eligible for ICCP and require child care, in-home care will be approved by the Department only when one (1) of the following special circumstances are met: c. A child has a verified illness or disability that would place the child or other children in an out-of home facility at risk (IDAPA: 16.06.12.400.02.c.)

- ☒ Restricted to in-home providers that meet additional health and safety requirements beyond those required by CCDF. Describe: **401. IN-HOME CARE HEALTH AND SAFETY REQUIREMENTS.** Each in-home care provider is responsible to ensure that health and safety requirements are met for children being cared for in the children's own home. **01. Health and Safety Inspections.** In-home health and safety inspections, described in Section 802 of these rules, are not required for in-home care providers caring for children in the children's own home. **02. Health and Safety Training.** Because in-home care providers are exempt from health and safety inspections, each in-home care provider must complete health and safety training provided by the local Health District covering requirements listed in Section 802 of these rules. (IDAPA: 16.06.12.401.01.-02.)
- ☒ Other. Describe: **Restricted based on the location of care (ie. Children living in rural areas where care is unavailable outside of their home).**

4.2 Assessing Market Rates and Child Care Costs

Lead Agencies have the option to conduct a statistically valid and reliable (1) market rate survey (MRS) reflecting variations in the price to parents of child care services by geographic area, type of provider, and age of child and/or (2) an alternative methodology, such as a cost estimation model (658E(c)(4)(B)). A cost estimation model estimates the cost of care by incorporating both data and assumptions to model what expected costs would be incurred by child care providers and parents under different cost scenarios. Another approach would be a cost study that collects cost data at the facility or program level to measure the costs (or inputs used) to deliver child care services. The MRS or alternative methodology must be developed and conducted no earlier than 2 years before the date of submission of the Plan.

Note: Any Lead Agency considering using an alternative methodology, instead of a market rate survey, is required to submit a description of its proposed approach to its ACF Regional Child Care Program Office for pre-approval in advance of the Plan submittal (see <https://www.acf.hhs.gov/occ/resource/ccdf-acf-pi-2016-08>). Advance approval is not required if the Lead Agency plans to implement both a market rate survey and an alternative methodology. In its request for ACF pre-approval, a Lead Agency must:

- Provide an overview of the Lead Agency's proposed approach (e.g., cost estimation model, cost study/survey, etc.), including a description of data sources.
- Describe how the Lead Agency will consult with the State's Early Childhood Advisory Council or similar coordinating body, local child care program administrators, local child care resource and referral agencies, organizations representing child care caregivers, teachers and directors, and other appropriate entities prior to conducting the identified alternative methodology.

- Describe how the alternative methodology will use methods that are statistically valid and reliable and will yield accurate results. For example, if using a survey, describe how the Lead Agency will ensure a representative sample and promote an adequate response rate. If using a cost estimation model, describe how the Lead Agency will validate the assumptions in the model.
- If the proposed alternative methodology includes an analysis of costs (e.g., cost estimation model or cost study/survey), describe how the alternative methodology will account for key factors that impact the cost of providing care—such as: staff salaries and benefits, training and professional development, curricula and supplies, group size and ratios, enrollment levels, licensing requirements, quality level, facility size, and other factors.
- Describe how the alternative methodology will provide complete information that captures the universe of providers in the child care market.
- Describe how the alternative methodology will reflect variations by provider type, age of children, geographic location and quality.
- Describe how the alternative methodology will use current, up-to-date data.
- Describe the estimated reporting burden and cost to conduct the approach.

4.2.1 Please identify the methodology(ies) used below to assess child care prices and/or costs.

- ☒ MRS
- ☐ Alternative methodology. Describe:
- ☐ Both. Describe:

4.2.2 Prior to developing and conducting the MRS or alternative methodology, the Lead Agency is required to consult with the (1) State Advisory Council or similar coordinating body, local child care program administrators, local child care resource and referral agencies, and other appropriate entities and (2) organizations representing caregivers, teachers, and directors (98.45 (e)).

Describe how the Lead Agency consulted with the:

- a) State Advisory Council or similar coordinating body: **In July 2018 the Idaho Child Care Program Advisory Panel members were provided presentations on the process, status and initial and final results of the Market Rate Survey. Members were given the opportunity to review the recommendations, ask questions and provide comments. After approval, the final Market Rate Survey is published on the child care page of Idaho Department of Health and Welfare website.**
- b) Local child care program administrators: **In July 2018 the Idaho Child Care Program Advisory Panel members were provided presentations on the process, status and initial and final results of the Market Rate Survey. Members were given the opportunity to review the recommendations, ask questions and provide comments. After approval, the final Market Rate Survey is published on the child care page of Idaho Department of Health and Welfare website. Members of that group include child care administrators from Boise, Pocatello, Coeur d'Alene, and Head Start.**
- c) Local child care resource and referral agencies: **In July 2018 the Idaho Child Care Program Advisory Panel members were provided presentations on the process, status and initial and final results of the Market Rate Survey. Members were given the opportunity to review the recommendations, ask questions and provide comments. After approval, the**

final Market Rate Survey is published on the child care page of Idaho Department of Health and Welfare website. Members of that group include leadership from Idaho's child care resource and referral agency.

- d) Organizations representing caregivers, teachers, and directors: In July 2018 the Idaho Child Care Program Advisory Panel members were provided presentations on the process, status and initial and final results of the Market Rate Survey. Members were given the opportunity to review the recommendations, ask questions and provide comments. After approval, the final Market Rate Survey is published on the child care page of Idaho Department of Health and Welfare website. Members of that group include leadership from Idaho Association for the Education of Young Children and the Idaho Head Start Association.

- e) Other. Describe:

4.2.3 Describe how the market rate survey is statistically valid and reliable. To be considered valid and reliable, the MRS must represent the child care market, provide complete and current data, use rigorous data collection procedures, reflect geographic variations, and analyze data in a manner that captures other relevant differences. For example, market rate surveys can use administrative data, such as child care resource and referral data, if they are representative of the market. If an alternative methodology, such as cost modeling, is used, demonstrate that the methodology used reliable methods. The market rate data were obtained from IdahoSTARS, the agency responsible for the state's Child Care Resource and Referral System. Provider data are maintained by IdahoSTARS using NACCRRAware, database software that generates child care referrals and reports and manages provider, client, and community data. Provider data were downloaded via text files and uploaded into Excel spreadsheets. The providers included in the analysis were required to be active and located in the state of Idaho, and the type of care provided was limited to child care centers, group care, and family care. In addition to basic information about the provider, the downloaded data included capacity and both full-time and part-time rates for five age groups: 0 - 12 months, 12 - 30 months, 30 - 60 months, 5 - 6 years, and 6 - 12 years. Providers were able to supply their rates in one or more of four modes: monthly, weekly, daily, and hourly rates. In order to perform the market rate analysis on consistent rate data, all rates (full- and part-time) were converted to monthly rate equivalents using standard conversion factors. (2018 Idaho Child Care Market Rate Analysis) The survey published on the Idaho Child Care Program webpage on the DHW website includes detailed documentation of the statistical analysis applied to the data set.

4.2.4 Describe how the market rate survey or alternative methodology reflects variations in the price or cost of child care services by:

- a) Geographic area (e.g., statewide or local markets). Describe: To evaluate the market structure, three geographic levels were examined -- zip code, county, and region - as the basic unit for the analysis, and county was selected as the unit that best allowed differentiation between units without a large number of units with missing information. Following methodology used by several other states in their market rate analyses, principal components analysis and cluster analysis were performed to divide counties into groups so that the counties within a group had similar rate structures while counties in different groups had differing rate structures. These analyses resulted in identifying three groups of counties. (2018 Idaho Child Care Market Rate Analysis)

- b) Type of provider. Describe: **Multivariate analyses of variance were also performed to compare rates between licensed and exempt family care facilities and between provider types; these analyses showed no significant differences in rates between licensed and exempt family care facilities and no significant differences in rates between family and group care facilities. As a result, the provider types were divided into two groups for the market rate analysis: child care centers, and all group and family care facilities. (2018 Idaho Child Care Market Rate Analysis)**
- c) Age of child. Describe: **With respect to age, children are divided into five categories in the IdahoSTARS database: 0 - 12 months, 13 through 30 months, 31 through 60 month, 5 through 6 years, and 6 through 12 years. These categories do not exactly align with the age groups used in provider licensing, and it is not possible to do any modifications to the age categories other than to combine the categories available in the Idaho STARS database. Within each of the age categories, rates are collected by IdahoSTARS for two "usage" categories: full-time and parttime. Some states collect rate data for school-age children for both school-year and summer/holiday periods, but the IdahoSTARS database does not collect separate data for the two periods (although a few providers have indicated summer rates using either multiple shifts or in a "Notes" field. As a result, the age and usage two-variable categorization scheme results in ten categories based. The market rate structure analysis will incorporate these ten categories, and the market rate analysis will provide percentiles for each of these ten categories. (2018 Idaho Child Care Market Rate Analysis)**
- d) Describe any other key variations examined by the market rate survey or alternative methodology, such as quality level.

4.2.5 After conducting the market rate survey or alternative methodology, the Lead Agency must prepare a detailed report containing the results of the MRS or alternative methodology. The detailed report must also include the estimated cost of care (including any relevant variation by geographic location, category of provider, or age of child) necessary to support (1) child care providers' implementation of the health, safety, quality, and staffing requirements and (2) higher quality care, as defined by the Lead Agency using a quality rating and improvement system or other system of quality indicators, at each level of quality. For States without a QRIS, the States may use other quality indicators (e.g. provider status related to accreditation, pre-K standards, Head Start performance standards, or State defined quality measures.)

The Lead Agency must make the report with these results widely available no later than 30 days after completion of the report, including posting the results on the Lead Agency website. The Lead Agency must describe in the detailed report how the Lead Agency took into consideration the views and comments of the public.

Describe how the Lead Agency made the results of the market rate survey or alternative methodology report widely available to the public (98.45(f)(1)) by responding to the questions below.

- a) Date of completion of the market rate survey or alternative methodology (must be no earlier than July 1, 2016, and no later than July 1, 2018). **July 2018**
- b) Date the report containing results was made widely available—no later than 30 days after the completion of the report.

- c) Describe how the Lead Agency made the detailed report containing results widely available and provide the link where the report is posted. **The Idaho Child Care Program Market Rate Analysis is published on the Idaho Child Care Program Website: <https://healthandwelfare.idaho.gov/Children/ChildCareAssistance/tabid/292/Default.aspx>**
- d) Describe how the Lead Agency considered stakeholder views and comments in the detailed report. **In July of 2018 the Idaho Child Care Program Advisory Panel members were provided a presentation on the process, status, and results of the Market Rate Study. Members were given the opportunity to review the recommendations, ask questions, and provide comments. An email link was provided as well to allow members an opportunity to also send in their feedback pertaining to market rate and or state plan.**

4.3 Setting Payment Rates

The Lead Agency must set CCDF subsidy payment rates, in accordance with the results of the current MRS or alternative methodology, at a level to ensure equal access for eligible families to child care services that are comparable with those provided to families not receiving CCDF funds. The Lead Agency must re-evaluate its payment rates *at least* every 3 years.

4.3.1 Provide the base payment rates and percentiles (based on the most recent MRS) for the following categories below. Percentiles are not required if the Lead Agency conducted an alternative methodology only (with pre-approval from ACF), but must be reported if the Lead Agency conducted an MRS alone or in combination with an alternative methodology. The ages and types of care listed below are meant to provide a snapshot of the categories on which rates can be based and are not intended to be comprehensive of all categories that might exist or to reflect the terms used by the Lead Agency for particular ages. Please use the most populous geographic region (area serving highest number of CCDF children) to report base payment rates below, if they are not statewide. Note: If the Lead Agency obtained approval to conduct an alternative methodology, then reporting of percentiles is not required.

- a) Infant (6 months), full-time licensed center care in the most populous geographic region
Rate **\$ 696** per **month** unit of time (e.g. daily, weekly, monthly)
Percentile of most recent MRS: **65th**
- b) Infant (6 months), full-time licensed FCC home in the most populous geographic region
Rate **\$618** per **month** unit of time (e.g. daily, weekly, monthly)
Percentile of most recent MRS: **65th**
- c) Toddler (18 months), full-time licensed center care in the most populous geographic region
Rate **\$684** per **month** unit of time (e.g. daily, weekly, monthly)
Percentile of most recent MRS: **65th**
- d) Toddler (18 months), full-time licensed FCC home in the most populous geographic region
Rate **\$588** per **month** unit of time (e.g. daily, weekly, monthly)

- Percentile of most recent MRS: **65th**
- e) Preschooler (4 years), full-time licensed center care in the most populous geographic region
Rate **\$623** per **month** unit of time (e.g. daily, weekly, monthly)
Percentile of most recent MRS: **65th**
- f) Preschooler (4 years), full-time licensed FCC home in the most populous geographic region
Rate **\$555** per **month** unit of time (e.g. daily, weekly, monthly)
Percentile of most recent MRS: **65th**
- g) School-age child (6 years), full-time licensed center care in most populous geographic region
Rate **\$546** per **month** unit of time (e.g. daily, weekly, monthly, etc.)
Percentile of most recent MRS: **65th**
- h) School-age child (6 years), full-time licensed FCC home in the most populous geographic region
Rate **\$506** per **month** unit of time (e.g. daily, weekly, monthly)
Percentile of most recent MRS: **65th**
- i) Describe how part-time and full-time care were defined and calculated.
Determining Part Time/Full Time Hours: When a household consists of two adults, the ICCP system places the household in a category based on the parent with the least number of hours. For example, if one adult is considered part time and the other is considered full time, the ICCP system places the entire household in a part time category. The following is considered when determining part time or full time activities: Multiple Activities (excluding education) Add activity hours in a given week to include three hours of travel time. -If total weekly hours exceed 25 or more, child is eligible for FULL TIME. -If total weekly hours are 24 or less, child is eligible for PART TIME. Single Activity When only one activity exists per adult, weekly hours are determined to include three hours of travel time. -If total weekly hours exceed 25 or more, child is eligible for FULL TIME. -If total weekly hours are 24 or less, child is eligible for PART TIME. (Benefits Process Manual: CCPC- Qualifying Activity Hours)
- j) Provide the effective date of the current payment rates (i.e., date of last update based on most recent MRS as reported in 4.2.5). **October 1, 2016**
- k) **Identify the most populous area of the state used to complete the responses above. Idaho's most populous area is Ada County.**
- l) Provide the citation or link, if available, to the payment rates.
<http://healthandwelfare.idaho.gov/Portals/0/FoodCashAssistance/ICCPLocalMarketRates.pdf>
- m) If the payment rates are not set by the Lead Agency for the entire state/territory, describe how many jurisdictions set their own payment rates (98.16(i)(3)).
Rates are set by the lead agency for the entire state.

4.3.2 Lead Agencies can choose to establish tiered rates, differential rates, or add-ons on top of their base rates as a way to increase payment rates for targeted needs (i.e., a higher rate for special needs children as both an incentive for providers to serve children with special needs and as a way to cover the higher costs to the provider to provide care for special needs children).

Check and describe the types of tiered reimbursement or differential rates, if any, the Lead Agency has chosen to implement. In the description of any tiered rates or add-ons, at a minimum, indicate the process and basis used for determining the tiered rates, including if the rates were based on the MRS and/or an alternative methodology, and the amount of the rate. Check all that apply.

- ☐ Differential rate for *non-traditional hours*. Describe:
- ☐ Differential rate for *children with special needs*, as defined by the state/territory. Describe:
- ☐ Differential rate for *infants and toddlers*. Note: Do not check if the Lead Agency has a different base rate for infants/toddlers with no separate bonus or add-on. Describe:
- ☐ Differential rate for *school-age programs*. Note: Do not check if the Lead Agency has a different base rate for school-age children with no separate bonus or add-on. Describe:
- ☐ Differential rate for *higher quality*, as defined by the state/territory. Describe:
- ☐ Other differential rates or tiered rates. Describe:
- ☒ Tiered or differential rates are not implemented.

4.4 Summary of Facts Used to Determine That Payment Rates Are Sufficient to Ensure Equal Access

4.4.1 Lead Agencies must certify that CCDF payment rates are sufficient to ensure equal access for eligible families to child care services comparable to those provided by families not receiving CCDF assistance (98.16(a)). Certify that payment rates reported in 4.3.1 are sufficient to ensure equal access by providing the following summary of facts (98.45(b)):

- a) Describe how a choice of the full range of providers eligible to receive CCDF is made available; the extent to which eligible child care providers participate in the CCDF system; and any barriers to participation, including barriers related to payment rates and practices. **CCDF children are served by every type of provider, in a range of programs meeting quality requirements. CCDF eligible providers have to comply with stricter requirements than state licensed providers. Children who are being cared for in Steps to Quality star rated facilities or facilities enrolled to obtain a star rating are considered being cared for in high quality care. The amount of CCDF children receiving high quality care is measured each year and reported annually in the Quality Performance Report.**
- b) Describe how payment rates are adequate and have been established based on the **most recent MRS or alternative methodology**. Note: Per the preamble (81 FR 67512), in instances where a MRS or alternative methodology indicates that prices or costs have increased, Lead Agencies must raise their rates as a result. **Rates are set on the most recent market rate survey, as published on the ICCP website. Rates reflect an increase from previous years.**
<http://healthandwelfare.idaho.gov/Children/ChildCareAssistance/tabid/292/Default.aspx>
x

- c) Describe how base payment rates enable providers to meet health, safety, quality, and staffing requirements under CCDF.
Payments are issued directly to eligible providers (via check or direct deposit), on the first business day of the month following the month when care was provided. Child care providers rely on ICCP for consistent, timely payments that sustain their businesses Rates set at the 65th percentile, and allowing the providers to bill ICCP in the same amount and methodology that they invoice their cash paying clients serves as a stable stream of income for their business.
- d) Describe how the Lead Agency took the cost of higher quality into account, including how payment rates for higher-quality care, as defined by the Lead Agency using a QRIS or other system of quality indicators, relate to the estimated cost of care at each level of quality. Note: For States without a QRIS, the States may use other quality indicators (e.g. provider status related to accreditation, pre-K standards, Head Start performance standards, or State defined quality measures).
- e) How will the Lead Agency ensure that the family contribution/co-payment, based on a sliding-fee scale, is affordable and is not a barrier to families receiving CCDF funds (98.16 (k))? Check all that apply.
- ☐ Limit the maximum co-payment per family. Describe:
 - ☐ Limit the combined amount of co-payment for all children to a percentage of family income. List the percentage of the co-payment limit and describe.
 - ☒ Minimize the abrupt termination of assistance before a family can afford the full cost of care (“the cliff effect”) as part of the graduated phase-out of assistance discussed in 3.1.7. Describe:
 - ☐ Other. Describe:
- f) To support parental choice and equal access to the full range of child care options, does the Lead Agency choose the option to allow providers to charge families additional amounts above the required co-payment in instances where the provider’s price exceeds the subsidy payment (98.45(b)(5))?
- ☐ No
 - ☒ Yes. If yes:
 - i. Provide the rationale for the Lead Agency’s policy to allow providers to charge families additional amounts above the required co-payment, including a demonstration of how the policy promotes affordability and access for families.
 - ii. Provide data (including data on the size and frequency of such amounts) on the extent to which CCDF providers charge additional amounts to families.
 - iii. Describe the Lead Agency’s analysis of the interaction between the additional amounts charged to families with the required family co-payment and the ability of current subsidy payment rates to provide access to care without additional fees.

- g) Describe how Lead Agencies' payment practices described in 4.5 support equal access to a range of providers. **CCDF children are served by every type of provider, in a range of programs meeting quality requirements. CCDF eligible providers have to comply with stricter requirements than state licensed providers. Children who are being cared for in Steps to Quality star rated facilities or facilities enrolled to obtain a star rating are considered being cared for in high quality care. The amount of CCDF children receiving high quality care is measured each year and reported annually in the Quality Performance Report.**
- h) Describe how and on what factors the Lead Agency differentiates payment rates. Check all that apply.
- ☒ Geographic area. Describe: **To evaluate the market structure, three geographic levels were examined -- zip code, county, and region - as the basic unit for the analysis, and county was selected as the unit that best allowed differentiation between units without a large number of units with missing information. Following methodology used by several other states in their market rate analyses, principal components analysis and cluster analysis were performed to divide counties into groups so that the counties within a group had similar rate structures while counties in different groups had differing rate structures. These analyses resulted in identifying three groups of counties. (2015 Idaho Child Care Market Rate Analysis)**
 - ☒ Type of provider. Describe: **Multivariate analyses of variance were also performed to compare rates between licensed and exempt family care facilities and between provider types; these analyses showed no significant differences in rates between licensed and exempt family care facilities and no significant differences in rates between family and group care facilities. As a result, the provider types were divided into two groups for the market rate analysis: child care centers, and all group and family care facilities. (2015 Idaho Child Care Market Rate Analysis)**
 - ☒ Age of child. Describe: **With respect to age, children are divided into five categories in the IdahoSTARS database: 0 - 12 months, 13 through 30 months, 31 through 60 month, 5 through 6 years, and 6 through 12 years. These categories do not exactly align with the age groups used in provider licensing, and it is not possible to do any modifications to the age categories other than to combine the categories available in the Idaho STARS database. Within each of the age categories, rates are collected by IdahoSTARS for two "usage" categories: full-time and parttime. Some states collect rate data for school-age children for both school-year and summer/holiday periods, but the IdahoSTARS database does not collect separate data for the two periods (although a few providers have indicated summer rates using either multiple shifts or in a "Notes" field. As a result, the age and usage two-variable categorization scheme results in ten categories based. The market rate structure analysis will incorporate these ten categories, and the market rate analysis will provide percentiles for each of these ten categories. (2015 Idaho Child Care Market Rate Analysis)**

☐ Quality level. Describe:

☐ Other. Describe:

i) Describe any additional facts that the Lead Agency considered in determining its payment rates to ensure equal access. Check all that apply and describe:

☐ Payment rates are set at the 75th percentile benchmark or higher of the most recent MRS. Describe:

☐ Based on the approved alternative methodology, payment rates ensure equal access. Describe:

☐ Feedback from parents, including parent surveys or parental complaints. Describe:

☐ Other. Describe:

4.5 Payment Practices and the Timeliness of Payments

Lead Agencies are required to demonstrate that they have established payment practices applicable to all CCDF child care providers that include ensuring the timeliness of payments by either (1) paying prospectively prior to the delivery of services or (2) paying within no more than 21 calendar days of the receipt of a complete invoice for services. To the extent practicable, the Lead Agency must also support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences by (1) paying based on a child's enrollment rather than attendance, (2) providing full payment if a child attends at least 85 percent of the authorized time, (3) providing full payment if a child is absent for 5 or fewer days in a month, or (4) using an alternative approach for which the Lead Agency provides a justification in its Plan (658E(c)(2)(S)(ii); 98.45(I)(2)).

Lead Agencies are required to use CCDF payment practices that reflect generally accepted payment practices of child care providers who serve children who do not receive CCDF-funded assistance. Unless a Lead Agency is able to demonstrate that the following policies are not generally accepted in its particular state, territory, or service area or among particular categories or types of providers, Lead Agencies must (1) pay providers based on established part-time or full-time rates rather than paying for hours of service or smaller increments of time and (2) pay for reasonable, mandatory registration fees that the provider charges to private-paying parents (658E(c)(2)(S); 98.45(I)(3)).

In addition, there are certain other generally accepted payment practices that are required. Lead Agencies are required to ensure that child care providers receive payment for any services in accordance with a payment agreement or an authorization for services, ensure that child care providers receive prompt notice of changes to a family's eligibility status that could impact payment, and establish timely appeal and resolution processes for any payment inaccuracies and disputes (98.45(I)(4) through (6); 658E(c)(2)(S)(ii); 98.45(I)(4); 98.45(I)(5); 98.45(I)(6)).

4.5.1 Certify by identifying and describing the payment practices below that the Lead Agency has implemented for all CCDF child care providers.

a) Ensure the timeliness of payments by either (Lead Agency to implement at least one of the following):

- ☐ Paying prospectively prior to the delivery of services. Describe the policy or procedure.
 - ☒ Paying within no more than 21 calendar days of the receipt of a complete invoice for services. Describe the policy or procedure. **Payments are issued directly to eligible providers (via check or direct deposit), on the second business day of the month following the month when care was provided. For example, payment for care provided in September payment would be made on the second business day of October.**
- b) To the extent practicable, support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences by: (Note: The Lead Agency is to choose at least one of the following):
- ☒ Paying based on a child's enrollment rather than attendance. Describe the policy or procedure. **Providers are obligated to bill the Idaho Child Care Program using their own usual and customary rates for child care to persons not entitled to receive benefits under ICCP; additionally, Local Market Rates and copayments are based on the parents' qualifying activity hours, not the amount or frequency of a child's attendance at child care. Therefore, if it is the provider's usual and customary practice to bill for absences, billed child care expenses will be paid for temporary breaks in attendance that are one month or less. (IDAPA: 16.06.12.502 and 16.06.12.505)**
 - ☒ Providing full payment if a child attends at least 85 percent of the authorized time. Describe the policy or procedure. **Providers are obligated to bill the Idaho Child Care Program using their own usual and customary rates for child care to persons not entitled to receive benefits under ICCP; additionally, Local Market Rates and copayments are based on the parents' qualifying activity hours, not the amount or frequency of a child's attendance at child care. Therefore, if it is the provider's usual and customary practice to bill for absences, billed child care expenses will be paid for temporary breaks in attendance that are one month or less. (IDAPA: 16.06.12.502 and 16.06.12.505)**
 - ☒ Providing full payment if a child is absent for five or fewer days in a month. Describe the policy or procedure. **Providers are obligated to bill the Idaho Child Care Program using their own usual and customary rates for child care to persons not entitled to receive benefits under ICCP; additionally Local Market Rates and copayments are based on the parents' qualifying activity hours, not the amount or frequency of a child's attendance at child care. Therefore if it is the provider's usual and customary practice to bill for absences, billed child care expenses will be paid for temporary breaks in attendance that are one month or less. (IDAPA: 16.06.12.502 and 16.06.12.505)**
 - ☐ Use an alternative approach for which the Lead Agency provides a justification in its Plan. If chosen, please describe the policy or procedure and the Lead Agency's justification for this approach.

- c) The Lead Agency's payment practices reflect generally accepted payment practices of child care providers who serve children who do not receive CCDF subsidies. These payment practices must include the following two practices unless the Lead Agency provides evidence that such practices are not generally accepted in its state (658E(c)(2)(S); 98.45(l)(3)).
- i. Paying on a part-time or full-time basis (rather than paying for hours of service or smaller increments of time). Describe the policy or procedure and include a definition of the time increments (e.g., part time, full-time). **Activity hours are projected to determine if payment is made on a full-time or part-time basis. Past activity hours may be used to project future activity hours if the employer and number of hours worked are the same and are expected to remain the same throughout the certification period. Hours for each qualifying activity must be projected individually and converted to a monthly amount. (IDAPA: 16.06.12.201)**
 - ii. Paying for reasonable mandatory registration fees that the provider charges to private-paying parents. Describe the policy or procedure. **One-time fees for registering a child in a child care facility are payable above the local market rate, if the fee is charged to all who enroll in the facility. Reimbursement can not exceed two hundred fifty dollars (\$250) and must be usual and customary rates charged to all families. Registration fees are separate from local market rates. (IDAPA: 16.06.12.500.02)**
- d) The Lead Agency ensures that providers are paid in accordance with a written payment agreement or an authorization for services that includes, at a minimum, information regarding provider payment policies, including rates, schedules, any fees charged to providers, and the dispute-resolution process. Describe: **All ICCP child care providers an 'ICCP Provider Agreement' annually which describes the provider's and the State's requirements and responsibilities while participating in the Idaho Child Care Program. Additionally, all new providers complete a subsidy orientation with an IdahoSTARS Resource Specialist to review the requirements and practices for participating with, and billing, ICCP.**
- e) The Lead Agency provides prompt notice to providers regarding any changes to the family's eligibility status that could impact payments, and such a notice is sent no later than the day that the Lead Agency becomes aware that such a change will occur. Describe: **Providers are notified of projected payment as soon as the client's eligibility is determined, and are notified if a family's projected payment amount changes, if the case closes, or requires the completion of a reevaluation to remain eligible. Providers receive a monthly statement of all issued payments with the payment.**
- f) The Lead Agency has a timely appeal and resolution process for payment inaccuracies and disputes. Describe: **Clients have 30 days from the date of the decision to request a Fair Hearing. Fair Hearing Officers review and responds to all requests within 5 calendar days of the "Fair Hearing Requested" task being set. They communicate the status of reinstatement/continuance of benefits pending the hearing result to the customer within 5 calendar days of the "Fair Hearing Requested" task being set. Then work with the client**

to coordinate and manage all aspects of a fair hearing to completion. (Benefits Process Manual: "Fair Hearing Process")

g) Other. Describe:

4.5.2 Do payment practices vary across regions, counties, and/or geographic areas?

☒ No, the practices do not vary across areas.

☐ Yes, the practices vary across areas. Describe:

4.6 Supply-Building Strategies to Meet the Needs of Certain Populations

Lead Agencies are required to develop and implement strategies to increase the supply of and to improve the quality of child care services for children in underserved areas; infants and toddlers; children with disabilities, as defined by the Lead Agency; and children who receive care during non-traditional hours. Lead Agencies are also required to identify shortages in the supply of high-quality providers (658 E(c)(2)(M); 98.16 (x)).

4.6.1 Lead Agencies must identify shortages in the supply of high-quality child care providers. List the data sources used to identify shortages, and describe the method of tracking progress to support equal access and parental choice.

☒ In licensed family child care. The Department of Health and Welfare uses TABLEAU and NACCRRAware as the data sources used to identify shortages.

☒ In licensed child care centers. The Department of Health and Welfare uses TABLEAU and NACCRRAware as the data sources used to identify shortages.

☐ Other.

4.6.2 Describe what method(s) is used to increase supply and to improve quality for the following.

a) Children in underserved areas. Check and describe all that apply.

☐ Grants and contracts (as discussed in 4.1.3). Describe:

☐ Family child care networks. Describe:

☒ Start-up funding. Describe: **_Start up grants are available to newly enrolled family and group child care providers, and is promoted at events throughout the community in efforts to recruit providers in areas throughout the state. The grant is a reimbursement grant that may cover such expenses as background checks for the provider and or items needed to pass their health inspection. _____**

☐ Technical assistance support. Describe:

☒ Recruitment of providers. Describe: **Child Care Consultants participate in community events throughout regions in Idaho, targeting recruitment of child care providers as well as engagement of those identified within regions. Booths, seminars, speaking engagements and targeted technical assistance are all activities to strengthen supply and improve quality.**

☐ Tiered payment rates (as discussed in 4.3.2). Describe:

- ☐ Support for improving business practices, such as management training, paid sick leave, and shared services. Describe:
- ☐ Accreditation supports. Describe:
- ☐ Child care health consultation. Describe:
- ☐ Mental health consultation. Describe:
- ☐ Other. Describe:

b) Infants and toddlers. Check **and describe** all that apply.

- ☐ Grants and contracts (as discussed in 4.1.3). Describe:
- ☐ Family child care networks. Describe:
- ☐ Start-up funding. Describe:
- ☒ Technical assistance support. Describe:
- ☐ Recruitment of providers. Describe:
- ☐ Tiered payment rates (as discussed in 4.3.2). Describe:
- ☒ Support for improving business practices, such as management training, paid sick leave, and shared services. Describe:
- ☐ Accreditation supports. Describe:
- ☒ Child care health consultation. Describe:
- ☐ Mental health consultation. Describe:
- ☐ Other. Describe:

c) Children with disabilities. Check **and describe** all that apply.

- ☐ Grants and contracts (as discussed in 4.1.3). Describe:
- ☐ Family child care networks. Describe:
- ☐ Start-up funding. Describe:
- ☒ Technical assistance support. Describe:
- ☐ Recruitment of providers. Describe:
- ☐ Tiered payment rates (as discussed in 4.3.2). Describe:
- ☒ Support for improving business practices, such as management training, paid sick leave, and shared services. Describe:
- ☐ Accreditation supports. Describe:
- ☒ Child care health consultation. Describe:
- ☐ Mental health consultation. Describe:
- ☐ Other. Describe:

d) Children who receive care during non-traditional hours. Check **and describe** all that apply.

- ☐ Grants and contracts (as discussed in 4.1.3). Describe:
- ☐ Family child care networks. Describe:
- ☒ Start-up funding. Describe:

- ☒ Technical assistance support. Describe:
 - ☐ Recruitment of providers. Describe:
 - ☐ Tiered payment rates (as discussed in 4.3.2). Describe:
 - ☐ Support for improving business practices, such as management training, paid sick leave, and shared services. Describe:
 - ☐ Accreditation supports. Describe:
 - ☒ Child care health consultation. Describe:
 - ☐ Mental health consultation. Describe:
 - ☐ Other. Describe:
- e) Other. Check and describe all that apply:
- ☐ Grants and contracts (as discussed in 4.1.3). Describe:
 - ☐ Family child care networks. Describe:
 - ☐ Start-up funding. Describe:
 - ☐ Technical assistance support. Describe:
 - ☐ Recruitment of providers. Describe:
 - ☐ Tiered payment rates (as discussed in 4.3.2). Describe:
 - ☐ Support for improving business practices, such as management training, paid sick leave, and shared services. Describe:
 - ☐ Accreditation supports. Describe:
 - ☐ Child care health consultation. Describe:
 - ☐ Mental health consultation. Describe:
 - ☐ Other. Describe:

4.6.3 Lead Agencies must prioritize investments for increasing access to high-quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment and do not currently have sufficient numbers of such programs.

- a) How does the Lead Agency define areas with significant concentrations of poverty and unemployment? **An analysis was performed so that the agency could highlight the poverty information (through census data) and the child and provider level data to get an idea of where ICCP children were being served and what types of providers were serving the most children, by county, in correlation to which of those counties had poverty rates. Idaho plans to use this data to work with IdahoStars to target the areas of need and increase recruitment of providers in those high need areas. The report will also be a tool to review data during the process of conducting the market rate study.**
- b) Describe how the Lead Agency prioritizes increasing access to high-quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment and that do not have high-quality programs. **Idaho does not have a waiting list for subsidized care, therefore, all children/families in areas of significant concentrations of poverty and unemployment would have access to subsidy (ICCP) as an option pending other eligibility criteria is met. IdahoStars project, through the University of Idaho targets child care providers who current run businesses in**

identified high poverty communities to increase technical assistance and recruit current providers into enrolling in the Steps to Quality program, Idaho's Quality Rating Improvement program.

5 Establish Standards and Monitoring Processes to Ensure the Health and Safety of Child Care Settings

Lead Agencies are required to certify that there are in effect licensing requirements applicable to all child care services in the state/territory, which supports the health and safety of all children in child care. States and territories may allow licensing exemptions. Lead Agencies must describe how such licensing exemptions do not endanger the health, safety, and development of CCDF children in license-exempt care (98.16 (u)).

Lead Agencies also must certify that there are in effect health and safety standards and training requirements applicable to providers serving CCDF children *whether they are licensed or license-exempt*. These health and safety requirements must be appropriate to the provider setting and age of the children served, must include specific topics and training on those topics, and are subject to monitoring and enforcement procedures.

The organization of this section begins with a description of the licensing system for providers of child care in a state or territory and then moves to focus on CCDF providers who may be licensed, exempt from licensing, or relative providers. The section then covers the health and safety requirements and training, and monitoring and enforcement procedures to ensure that CCDF child care providers comply with licensing and health and safety requirements (98.16(n)). Lead Agencies are also asked to describe any exemptions for relative providers (98.16(l)). This section also addresses group size limits; child-staff ratios; and required qualifications for caregivers, teachers, and directors (98.16(m)) serving CCDF children.

Note: When responding to questions in this section, the OCC recognizes that each State/Territory identifies and defines its own categories of care. The OCC does not expect States/Territories to change their definitions to fit the CCDF-defined categories of care. For these questions, provide responses that closely match the CCDF categories of care.

Criminal background check requirements are included in this section (98.16(o)). It is important to note that these requirements are in effect for all child care staff members who are licensed, regulated, or registered under state/territory law and all other providers eligible to deliver CCDF services.

5.1 Licensing Requirements

Each state/territory must certify it has in effect licensing requirements applicable to all child care services provided within the state/territory (not restricted to providers receiving CCDF funds) and provide a detailed description of these requirements and how the requirements are effectively enforced (658E(c)(2)(F)). If any types of providers are exempt from licensing requirements, the state/territory must describe those exemptions and describe how these

exemptions do not endanger the health, safety, or development of children. The descriptions must also include any exemptions based on provider category, type, or setting; length of day; and providers not subject to licensing because the number of children served falls below a Lead Agency-defined threshold and any other exemption to licensing requirements (658E(c)(2)(F); 98.16(u); 98.40(a)(2)(iv)).

5.1.1 To certify, describe the licensing requirements applicable to child care services provided within the state/territory by identifying the providers in your state/territory that are subject to licensing using the CCDF categories listed below? Check all that apply and provide a citation to the licensing rule.

- ☒ **Center-based child care. Describe and provide the citation: IDAPA 16.06.02.301. TYPES OF DAYCARE LICENSES.** Subject to meeting all requirements under Title 39, Chapter 11, Idaho Code, and the rules and minimum standards in this chapter, the Department will determine the type of daycare license required by an owner or operator providing daycare by counting each child in attendance, regardless of relationship to the person or persons providing the care. A daycare center license is issued for a place or facility providing daycare, where thirteen (13) or more children, regardless of relationship to the person or persons providing the care, are in attendance.
- ☒ **Family child care. Describe and provide the citation: IDAPA 16.06.02.301. TYPES OF DAYCARE LICENSES.** Subject to meeting all requirements under Title 39, Chapter 11, Idaho Code, and the rules and minimum standards in this chapter, the Department will determine the type of daycare license required by an owner or operator providing daycare by counting each child in attendance, regardless of relationship to the person or persons providing the care. A family daycare home is not required to be licensed. However, a family daycare home may voluntarily elect to be licensed by the Department. (IDAPA: 16.06.02.301) Idaho provides licensing of a Group Daycare Facility, which may be located within a home/residence setting. A group daycare facility license is issued for a place or facility providing daycare, where seven (7) to twelve (12) children, regardless of relationship to the person or persons providing the care, are in attendance.
- ☐ **In-home care (care in the child's own home). Describe and provide the citation (if applicable):** There is no state licensing requirement when care is provided for a child in the child's own home.

5.1.2 Describe if any providers are exempted from licensing requirements and how such exemptions do not endanger the health, safety, and development of children (658E (c)(2)(F); 98.40(a)(2)). Note: Additional information about exemptions related to CCDF providers is required in 5.1.3. A family daycare home is exempt from licensure, however, may voluntarily elect to be licensed. The occasional or irregular care of a neighbor's, relative's or friend's child or children by a person not ordinarily in the business of providing daycare is also exempt from licensing. Exempt providers commonly provide care in their home or the home of the parent or guardian. Any person providing daycare for four to six children in a family daycare home must

complete and pass a Criminal History and Background Check to ensure the safety and well being of children in their care.

5.1.3 Check and describe any CCDF providers in your state/territory who are exempt from licensing (98.40(2)(i) through (iv))? Describe exemptions based on length of day, threshold on the number of children in care, ages of children in care or any other factors applicable to the exemption

- ☐ Center-based child care. If checked, describe the exemptions. **Idaho does not exempt child care centers**
- ☒ Family child care. If checked, describe the exemptions.
Family Daycare Home. A family daycare home is not required to be licensed. However, a family daycare home may voluntarily elect to be licensed by the Department. (IDAPA: 16.06.02.301.03)
- ☒ In-home care. If checked, describe the exemptions.
Under Section 39-1103, Idaho Code, the minimum standards and licensing requirements in these rules do not apply to the occasional or irregular care of a relative's child or children by a person not ordinarily in the business of providing daycare or the provision of care for children of a family within the second degree of relationship, as defined in IDAPA 16.06.02.011 of those rules.

5.2 Health and Safety Standards and Requirements for CCDF Providers

5.2.1 Standards on ratios, group sizes, and qualifications for CCDF providers.

Lead Agencies are required to establish child care standards for providers receiving CCDF funds, appropriate to the type of child care setting involved, that address appropriate ratios between the number of children and number of providers in terms of the age of the children, group size limits for specific age populations, and the required qualifications for providers (658E(c)(2)(H); 98.41(d); 98.16(m)). For ease of responding, this section is organized by CCDF categories of care, licensing status, and age categories. **Respondents should map their Lead Agency categories of care to the CCDF categories.**

a) Licensed CCDF center-based care

1. Infant

- How does the State/territory define infant (age range):
A child under the age of 24 months.
- Ratio: **1 adult to 6 infants.**
- Group size:
Each type of child care setting is limited by their Provider Agreement or Daycare License to the total number of children in their care. Additionally the ratio point system limits the number of children per provider based on the children's ages, which is an important developmental consideration when evaluating mixed-age child care programs. When monitoring group size the ICCP Provider Agreement, Daycare License Type, Occupancy Load, and child ratio points are all considered and the lowest number of children is the most allowed. (IDAPA 16.06.02.301, 16.06.02.335, 16.06.02.350) Additionally, cities and local municipalities may elect

to administer more stringent group size requirements.

The maximum Occupancy Load for a child care facility is required to be determined prior to the issuance of a daycare license. (IDAPA 16.06.02.350) Occupant loads are determined by the local fire official according to the current Idaho Fire Code, which is based on the International Fire Code. (http://www.doi.idaho.gov/SFM/Docs/Idaho_Fire_Code_2012.pdf).

When monitoring group size the ICCP Provider Agreement, Daycare License Type, Occupancy Load, and child ratio points are all considered and the lowest number of children is the most allowed. For example, if a provider requested a Center Daycare License for 50 children, but the total maximum occupancy load for the facility was set at a maximum of 30 people on site by the local Fire Marshall. The provider would be limited to the Occupancy Load of no more than 30 people (adults plus children) onsite, and ratio points may further limit the amount of children allowed in the provider's care based on the children's ages. (IDAPA 16.06.02.301, 16.06.02.335, 16.06.02.350) Additionally, cities and local municipalities may elect to administer more stringent group size requirements.

- Teacher/caregiver qualifications:

Infant lead teacher:

All ICCP child care providers providing services must be eighteen (18) years old or older. Persons sixteen (16) or seventeen (17) years old may provide child care if they have direct, on-site supervision from a licensed child care provider who is at least eighteen (18) years old. Each provider must certify that he does not have a communicable disease or any physical or psychological condition that might pose a threat to the safety of a child in his care. All ICCP providers, employees, volunteers, and individuals age thirteen (13) or older who have direct contact with or provide care to children eligible for ICCP benefits must successfully receive clearance from a comprehensive criminal history and background check. Each owner or operator of a daycare center licensed by the Department must receive and ensure that each staff member receives and completes four (4) hours of on-going training every twelve (12) months after the staff member's date of hire. Required trainings must be related to continuing education in child development, does not include their pediatric CPR and pediatric first aid training, and must be documented and maintained in each staff member's record.

Additionally, each owner or operator of a daycare center, group daycare facility, or family daycare home voluntarily licensed by the Department must receive and ensure that each staff member receives and completes Pediatric Rescue Breathing, Infant-Child CPR, and Pediatric First Aid Treatment certification from a certified instructor. (IDAPA 16.06.02.330)

Assistant teacher:

All ICCP child care providers providing services must be eighteen (18) years old or older. Persons sixteen (16) or seventeen (17) years old may provide child care if they have direct, on-site supervision from a licensed child care provider who is at least eighteen (18) years old. Each provider must certify that he does not have a

communicable disease or any physical or psychological condition that might pose a threat to the safety of a child in his care. All ICCP providers, employees, volunteers, and individuals age thirteen (13) or older who have direct contact with or provide care to children eligible for ICCP benefits must successfully receive clearance from a comprehensive criminal history and background check. Each owner or operator of a daycare center licensed by the Department must receive and ensure that each staff member receives and completes four (4) hours of on-going training every twelve (12) months after the staff member's date of hire. Required trainings must be related to continuing education in child development, does not include their pediatric CPR and pediatric first aid training, and must be documented and maintained in each staff member's record. Additionally, each owner or operator of a daycare center, group daycare facility, or family daycare home voluntarily licensed by the Department must receive and ensure that each staff member receives and completes Pediatric Rescue Breathing, Infant-Child CPR, and Pediatric First Aid Treatment certification from a certified instructor. (IDAPA16.06.02.330)

2. Toddler

- How does the State/territory define toddler (age range):
A child aged twenty-four (24) months to under thirty-six (36) months of age
- Ratio: 1 adult to 8 toddlers.
- Group size: Each type of child care setting is limited by their Provider Agreement or Daycare License to the total number of children in their care. Additionally the ratio point system limits the number of children per provider based on the children's ages, which is an important developmental consideration when evaluating mixed-age child care programs. When monitoring group size the ICCP Provider Agreement, Daycare License Type, Occupancy Load, and child ratio points are all considered and the lowest number of children is the most allowed. (IDAPA 16.06.02.301, 16.06.02.335, 16.06.02.350) Additionally, cities and local municipalities may elect to administer more stringent group size requirements.

The maximum Occupancy Load for a child care facility is required to be determined prior to the issuance of a daycare license. (IDAPA 16.06.02.350)
Occupant loads are determined by the local fire official according to the current Idaho Fire Code, which is based on the International Fire Code.
(http://www.doi.idaho.gov/SFM/Docs/Idaho_Fire_Code_2012.pdf)

When monitoring group size the ICCP Provider Agreement, Daycare License Type, Occupancy Load, and child ratio points are all considered and the lowest number of children is the most allowed. For example, if a provider requested a Center Daycare License for 50 children, but the total maximum occupancy load for the facility was set at a maximum of 30 people on site by the local Fire Marshall. The provider would be limited to the Occupancy Load of no more than 30 people (adults plus children) onsite, and ratio points may further limit the amount of children allowed in the provider's care based on the children's ages. (IDAPA 16.06.02.301, 16.06.02.335, 16.06.02.350) Additionally, cities and local

municipalities may elect to administer more stringent group size requirements.

- Teacher/caregiver qualifications:

Toddler Lead Teacher:

All ICCP child care providers providing services must be eighteen (18) years old or older. Persons sixteen (16) or seventeen (17) years old may provide child care if they have direct, on-site supervision from a licensed child care provider who is at least eighteen (18) years old. Each provider must certify that he does not have a communicable disease or any physical or psychological condition that might pose a threat to the safety of a child in his care. All ICCP providers, employees, volunteers, and individuals age thirteen (13) or older who have direct contact with or provide care to children eligible for ICCP benefits must successfully receive clearance from a comprehensive criminal history and background check. Each owner or operator of a daycare center licensed by the Department must receive and ensure that each staff member receives and completes four (4) hours of on-going training every twelve (12) months after the staff member's date of hire. Required trainings must be related to continuing education in child development, does not include their pediatric CPR and pediatric first aid training, and must be documented and maintained in each staff member's record. Additionally, each owner or operator of a daycare center, group daycare facility, or family daycare home voluntarily licensed by the Department must receive and ensure that each staff member receives and completes Pediatric Rescue Breathing, Infant-Child CPR, and Pediatric First Aid Treatment certification from a certified instructor. (IDAPA16.06.02.330)

Assistant Teacher:

All ICCP child care providers providing services must be eighteen (18) years old or older. Persons sixteen (16) or seventeen (17) years old may provide child care if they have direct, on-site supervision from a licensed child care provider who is at least eighteen (18) years old. Each provider must certify that he does not have a communicable disease or any physical or psychological condition that might pose a threat to the safety of a child in his care. All ICCP providers, employees, volunteers, and individuals age thirteen (13) or older who have direct contact with or provide care to children eligible for ICCP benefits must successfully receive clearance from a comprehensive criminal history and background check. Each owner or operator of a daycare center licensed by the Department must receive and ensure that each staff member receives and completes four (4) hours of on-going training every twelve (12) months after the staff member's date of hire. Required trainings must be related to continuing education in child development, does not include their pediatric CPR and pediatric first aid training, and must be documented and maintained in each staff member's record. Additionally, each owner or operator of a daycare center, group daycare facility, or family daycare home voluntarily licensed by the Department must receive and ensure that each staff member receives and completes Pediatric Rescue Breathing, Infant-Child CPR, and Pediatric First Aid Treatment certification from a certified instructor. (IDAPA16.06.02.330)

3. Preschool

- How does the State/territory define preschool (age range):
A child aged thirty-six (36) months to under five (5) years of age.
- Ratio: 1 adult to 12 preschool aged children
- Group size:
Each type of child care setting is limited by their Provider Agreement or Daycare License to the total number of children in their care. Additionally the ratio point system limits the number of children per provider based on the children's ages, which is an important developmental consideration when evaluating mixed-age child care programs. When monitoring group size the ICCP Provider Agreement, Daycare License Type, Occupancy Load, and child ratio points are all considered and the lowest number of children is the most allowed. (IDAPA 16.06.02.301, 16.06.02.335, 16.06.02.350) Additionally, cities and local municipalities may elect to administer more stringent group size requirements.

The maximum Occupancy Load for a child care facility is required to be determined prior to the issuance of a daycare license. (IDAPA 16.06.02.350) Occupant loads are determined by the local fire official according to the current Idaho Fire Code, which is based on the International Fire Code. (http://www.doi.idaho.gov/SFM/Docs/Idaho_Fire_Code_2012.pdf)

When monitoring group size the ICCP Provider Agreement, Daycare License Type, Occupancy Load, and child ratio points are all considered and the lowest number of children is the most allowed. For example, if a provider requested a Center Daycare License for 50 children, but the total maximum occupancy load for the facility was set at a maximum of 30 people on site by the local Fire Marshall. The provider would be limited to the Occupancy Load of no more than 30 people (adults plus children) on site, and ratio points may further limit the amount of children allowed in the provider's care based on the children's ages. (IDAPA 16.06.02.301, 16.06.02.335, 16.06.02.350) Additionally, cities and local municipalities may elect to administer more stringent group size requirements.

- Teacher/caregiver qualifications:
Preschool Lead Teacher:
All ICCP child care providers providing services must be eighteen (18) years old or older. Persons sixteen (16) or seventeen (17) years old may provide child care if they have direct, on-site supervision from a licensed child care provider who is at least eighteen (18) years old. Each provider must certify that he does not have a communicable disease or any physical or psychological condition that might pose a threat to the safety of a child in his care. All ICCP providers, employees, volunteers, and individuals age thirteen (13) or older who have direct contact with or provide care to children eligible for ICCP benefits must successfully receive clearance from a comprehensive criminal history and background check. Each owner or operator of a daycare center licensed by the Department must receive and ensure that each staff member receives and completes four (4) hours of on-going training every twelve (12) months after the staff member's date of hire. Required trainings must be related to continuing education in child development, does not include their pediatric CPR and pediatric first aid training, and must be documented and maintained in each staff member's record.

Additionally, each owner or operator of a daycare center, group daycare facility, or family daycare home voluntarily licensed by the Department must receive and ensure that each staff member receives and completes Pediatric Rescue Breathing, Infant-Child CPR, and Pediatric First Aid Treatment certification from a certified instructor. (IDAPA16.06.02.330)

Assistant Teacher:

All ICCP child care providers providing services must be eighteen (18) years old or older. Persons sixteen (16) or seventeen (17) years old may provide child care if they have direct, on-site supervision from a licensed child care provider who is at least eighteen (18) years old. Each provider must certify that he does not have a communicable disease or any physical or psychological condition that might pose a threat to the safety of a child in his care. All ICCP providers, employees, volunteers, and individuals age thirteen (13) or older who have direct contact with or provide care to children eligible for ICCP benefits must successfully receive clearance from a comprehensive criminal history and background check. Each owner or operator of a daycare center licensed by the Department must receive and ensure that each staff member receives and completes four (4) hours of on-going training every twelve (12) months after the staff member's date of hire. Required trainings must be related to continuing education in child development, does not include their pediatric CPR and pediatric first aid training, and must be documented and maintained in each staff member's record.

Additionally, each owner or operator of a daycare center, group daycare facility, or family daycare home voluntarily licensed by the Department must receive and ensure that each staff member receives and completes Pediatric Rescue Breathing, Infant-Child CPR, and Pediatric First Aid Treatment certification from a certified instructor. (IDAPA16.06.02.330)

4. School-age

- How does the State/territory define school-age (age range):
A child five (5) years to under thirteen (13) years of age.
- Ratio: 1 adult to 24 school age children
- Group size: Each type of child care setting is limited by their Provider Agreement or Daycare License to the total number of children in their care. Additionally the ratio point system limits the number of children per provider based on the children's ages, which is an important developmental consideration when evaluating mixed-age child care programs. When monitoring group size the ICCP Provider Agreement, Daycare License Type, Occupancy Load, and child ratio points are all considered and the lowest number of children is the most allowed. (IDAPA 16.06.02.301, 16.06.02.335, 16.06.02.350) Additionally, cities and local municipalities may elect to administer more stringent group size requirements.

The maximum Occupancy Load for a child care facility is required to be determined prior to the issuance of a daycare license. (IDAPA 16.06.02.350) Occupant loads are determined by the local fire official according to the current Idaho Fire Code, which is based on the International Fire Code.

(http://www.doi.idaho.gov/SFM/Docs/Idaho_Fire_Code_2012.pdf)

When monitoring group size the ICCP Provider Agreement, Daycare License Type, Occupancy Load, and child ratio points are all considered and the lowest number of children is the most allowed. For example, if a provider requested a Center Daycare License for 50 children, but the total maximum occupancy load for the facility was set at a maximum of 30 people on site by the local Fire Marshall. The provider would be limited to the Occupancy Load of no more than 30 people (adults plus children) onsite, and ratio points may further limit the amount of children allowed in the provider's care based on the children's ages. (IDAPA 16.06.02.301, 16.06.02.335, 16.06.02.350) Additionally, cities and local municipalities may elect to administer more stringent group size requirements.

- Teacher/caregiver qualifications:

School-Age Lead Teacher:

All ICCP child care providers providing services must be eighteen (18) years old or older. Persons sixteen (16) or seventeen (17) years old may provide child care if they have direct, on-site supervision from a licensed child care provider who is at least eighteen (18) years old. Each provider must certify that he does not have a communicable disease or any physical or psychological condition that might pose a threat to the safety of a child in his care. All ICCP providers, employees, volunteers, and individuals age thirteen (13) or older who have direct contact with or provide care to children eligible for ICCP benefits must successfully receive clearance from a comprehensive criminal history and background check. Each owner or operator of a daycare center licensed by the Department must receive and ensure that each staff member receives and completes four (4) hours of on-going training every twelve (12) months after the staff member's date of hire. Required trainings must be related to continuing education in child development, does not include their pediatric CPR and pediatric first aid training, and must be documented and maintained in each staff member's record.

Additionally, each owner or operator of a daycare center, group daycare facility, or family daycare home voluntarily licensed by the Department must receive and ensure that each staff member receives and completes Pediatric Rescue Breathing, Infant-Child CPR, and Pediatric First Aid Treatment certification from a certified instructor. (IDAPA 16.06.02.330)

Assistant Teacher Qualifications:

All ICCP child care providers providing services must be eighteen (18) years old or older. Persons sixteen (16) or seventeen (17) years old may provide child care if they have direct, on-site supervision from a licensed child care provider who is at least eighteen (18) years old. Each provider must certify that he does not have a communicable disease or any physical or psychological condition that might pose a threat to the safety of a child in his care. All ICCP providers, employees, volunteers, and individuals age thirteen (13) or older who have direct contact with or provide care to children eligible for ICCP benefits must successfully receive clearance from a comprehensive criminal history and background check. Each owner or operator of a daycare center licensed by the Department must

receive and ensure that each staff member receives and completes four (4) hours of on-going training every twelve (12) months after the staff member's date of hire. Required trainings must be related to continuing education in child development, does not include their pediatric CPR and pediatric first aid training, and must be documented and maintained in each staff member's record. Additionally, each owner or operator of a daycare center, group daycare facility, or family daycare home voluntarily licensed by the Department must receive and ensure that each staff member receives and completes Pediatric Rescue Breathing, Infant-Child CPR, and Pediatric First Aid Treatment certification from a certified instructor. (IDAPA 16.06.02.330)

5. If any of the responses above are different for exempt child care centers, describe which requirements apply to exempt centers.
Idaho does not exempt child care facilities.
6. Describe, if applicable, ratios, group sizes, and qualifications for classrooms with mixed age groups.
Under Section 39-1109, Idaho Code, all providers are subject to the adult to child ratios point systems as follows: The maximum allowable points for each staff member is twelve (12), using the following point system which is based on the age of each child in attendance:
 - a. Under the age of twenty-four (24) months, each child equals two (2) points.
 - b. From the age of twenty-four (24) months to under the age of thirty-six (36) months, each child equals one and one-half (1 1/2) points.
 - c. From the age of thirty-six (36) months to under the age of five (5) years, each child equals one (1) point. (3-21-12)
 - d. From the age of five (5) years to under the age of thirteen (13) years, each child equals one-half (1/ 2) point.

Compliance with Child-Staff Ratios.

Child-staff ratios must be maintained at all times during all hours of operation when children are in attendance and when transporting children.

- a. Each child in attendance is counted by the Department for the purposes of calculating maximum allowable points, counting the number of children in attendance, and for determining compliance with child-staff ratios;
- b. Each adult staff member who is providing direct care for a child or children is counted by the Department as one (1) staff member for the purposes of counting the number of staff on-duty and determining compliance with child-staff ratios; and
- c. Each staff member sixteen (16) and seventeen (17) years of age under the supervision of an adult staff member, when providing direct care for a child or children, may be counted by the Department as one (1) staff member for the purposes of counting the number of staff on-duty and determining compliance with child-staff ratios. (IDAPA16.06.02.335.)

Each type of child care setting is limited by their Provider Agreement or Daycare License to the total number of children in their care. Additionally the ratio point system limits the number of children per provider based on the children's ages,

which is an important developmental consideration when evaluating mixed-age child care programs.

When monitoring group size the ICCP Provider Agreement, Daycare License Type, Occupancy Load, and child ratio points are all considered and the lowest number of children is the most allowed. (IDAPA 16.06.02.301, 16.06.02.335, 16.06.02.350) Additionally, cities and local municipalities may elect to administer more stringent group size requirements.

7. Describe the director qualifications for licensed CCDF center-based care, **including any variations based on the ages of children in care.** +

b) Licensed CCDF family child care provider

1. Infant

- How does the State/territory define infant (age range):
A child under the age of 24 months.
- Ratio:
The maximum allowable child: staff ratio shall be a maximum of twelve (12) points per staff member using the following point system: (i) Each child in attendance under the age of twenty-four (24) months shall equal two (2) points. (ii) Each child in attendance from twenty-four (24) months to under thirty-six (36) months of age shall equal one and one-half (1 1/2) points. (iii) Each child in attendance from thirty-six (36) months to under five (5) years of age shall equal one (1) point. (iv) Each child in attendance from five (5) years to under thirteen (13) years of age shall equal one-half (1/2) point. (b) Each child in attendance shall be counted by the department for purposes of calculating maximum allowable points, counting the number of children in attendance and for determining compliance with child:staff ratios. (39-1109.Idaho Code.)
- Group size:
Maximum group size for family child care is for six (6) or fewer children. (IDAPA:16.06.12.101.) However, per Idaho Code 39-1108, cities and local municipalities may elect to administer more stringent licensing requirements.

Group Daycare Facility. A group daycare facility license is issued for a place or facility providing daycare, where seven (7) to twelve (12) children, regardless of relationship to the person or persons providing the care, are in attendance. (IDAPA: 16.06.12.101.)

Maximum group size for family child care is for six (6) or fewer children. (IDAPA:16.06.12.101.) However, per Idaho Code 39-1108, cities and local municipalities may elect to administer more stringent licensing requirements.

Each child in attendance is counted by the Department for the purposes of calculating maximum allowable points, counting the number of children in attendance, and for determining compliance with child-staff ratios. (IDAPA:

16.06.02.335.)

- Teacher/caregiver qualifications:

Licensed Family Child Care home provider:

All ICCP child care providers providing services must be eighteen (18) years old or older. Persons sixteen (16) or seventeen (17) years old may provide child care if they have direct, on-site supervision from a licensed child care provider who is at least eighteen (18) years old. Each provider must certify that he does not have a communicable disease or any physical or psychological condition that might pose a threat to the safety of a child in his care. All ICCP providers, employees, volunteers, and individuals age thirteen (13) or older who have direct contact with or provide care to children eligible for ICCP benefits must successfully receive clearance from a comprehensive criminal history and background check. Additionally, each owner or operator of a daycare center, group daycare facility, or family daycare home voluntarily licensed by the Department must receive and ensure that each staff member receives and completes Pediatric Rescue Breathing, Infant-Child CPR, and Pediatric First Aid Treatment certification from a certified instructor. (IDAPA 16.06.02.330)

Other eligible providers:

All ICCP child care providers providing services must be eighteen (18) years old or older. Persons sixteen (16) or seventeen (17) years old may provide child care if they have direct, on-site supervision from a licensed child care provider who is at least eighteen (18) years old. Each provider must certify that he does not have a communicable disease or any physical or psychological condition that might pose a threat to the safety of a child in his care. All ICCP providers, employees, volunteers, and individuals age thirteen (13) or older who have direct contact with or provide care to children eligible for ICCP benefits must successfully receive clearance from a comprehensive criminal history and background check. Providers must ensure that at all times children are present at least one (1) adult on the premises has current certification in pediatric rescue breathing and first aid treatment from a certified instructor. (IDAPA 16.06.12.802.08.)

2. Toddler

- How does the State/territory define toddler (age range):
A child aged twenty-four (24) months to under thirty-six (36) months of age.
- Ratio: The maximum allowable child: staff ratio shall be a maximum of twelve (12) points per staff member using the following point system: (i) Each child in attendance under the age of twenty-four (24) months shall equal two (2) points. (ii) Each child in attendance from twenty-four (24) months to under thirty-six (36) months of age shall equal one and one-half (1 1/2) points. (iii) Each child in attendance from thirty-six (36) months to under five (5) years of age shall equal one (1) point. (iv) Each child in attendance from five (5) years to under thirteen (13) years of age shall equal one-half (1/2) point. (b) Each child in attendance shall be counted by the department for purposes of calculating maximum allowable points, counting the number of children in attendance and for determining compliance with child:staff ratios. (39-1109.Idaho Code.)

- Group size: Maximum group size for family child care is for six (6) or fewer children. (IDAPA:16.06.12.101.) However, per Idaho Code 39-1108, cities and local municipalities may elect to administer more stringent licensing requirements.

Group Daycare Facility. A group daycare facility license is issued for a place or facility providing daycare, where seven (7) to twelve (12) children, regardless of relationship to the person or persons providing the care, are in attendance. (IDAPA: 16.06.12.101.)

Maximum group size for family child care is for six (6) or fewer children. (IDAPA:16.06.12.101.) However, per Idaho Code 39-1108, cities and local municipalities may elect to administer more stringent licensing requirements.

Each child in attendance is counted by the Department for the purposes of calculating maximum allowable points, counting the number of children in attendance, and for determining compliance with child-staff ratios. (IDAPA: 16.06.02.335.)

- Teacher/caregiver qualifications:
Licensed Family Child Care home provider:
All ICCP child care providers providing services must be eighteen (18) years old or older. Persons sixteen (16) or seventeen (17) years old may provide child care if they have direct, on-site supervision from a licensed child care provider who is at least eighteen (18) years old. Each provider must certify that he does not have a communicable disease or any physical or psychological condition that might pose a threat to the safety of a child in his care. All ICCP providers, employees, volunteers, and individuals age thirteen (13) or older who have direct contact with or provide care to children eligible for ICCP benefits must successfully receive clearance from a comprehensive criminal history and background check. Additionally, each owner or operator of a daycare center, group daycare facility, or family daycare home voluntarily licensed by the Department must receive and ensure that each staff member receives and completes Pediatric Rescue Breathing, Infant-Child CPR, and Pediatric First Aid Treatment certification from a certified instructor. (IDAPA 16.06.02.330)

Other eligible providers:

All ICCP child care providers providing services must be eighteen (18) years old or older. Persons sixteen (16) or seventeen (17) years old may provide child care if they have direct, on-site supervision from a licensed child care provider who is at least eighteen (18) years old. Each provider must certify that he does not have a communicable disease or any physical or psychological condition that might pose a threat to the safety of a child in his care. All ICCP providers, employees, volunteers, and individuals age thirteen (13) or older who have direct contact with or provide care to children eligible for ICCP benefits must successfully receive clearance from a comprehensive criminal history and background check. Providers must ensure that at all times children are present at least one (1) adult on the premises has current certification in pediatric rescue breathing and first aid treatment from a certified instructor. (IDAPA 16.06.12.802.08.)

3. Preschool

- How does the State/territory define preschool (age range):
A child aged thirty-six (36) months to under five (5) years of age.
- Ratio: The maximum allowable child: staff ratio shall be a maximum of twelve (12) points per staff member using the following point system: (i) Each child in attendance under the age of twenty-four (24) months shall equal two (2) points. (ii) Each child in attendance from twenty-four (24) months to under thirty-six (36) months of age shall equal one and one-half (1 1/2) points. (iii) Each child in attendance from thirty-six (36) months to under five (5) years of age shall equal one (1) point. (iv) Each child in attendance from five (5) years to under thirteen (13) years of age shall equal one-half (1/2) point. (b) Each child in attendance shall be counted by the department for purposes of calculating maximum allowable points, counting the number of children in attendance and for determining compliance with child:staff ratios. (39-1109, Idaho Code.)
- Group size: Maximum group size for family child care is for six (6) or fewer children. (IDAPA:16.06.12.101.) However, per Idaho Code 39-1108, cities and local municipalities may elect to administer more stringent licensing requirements.

Group Daycare Facility. A group daycare facility license is issued for a place or facility providing daycare, where seven (7) to twelve (12) children, regardless of relationship to the person or persons providing the care, are in attendance. (IDAPA: 16.06.12.101.)

Maximum group size for family child care is for six (6) or fewer children. (IDAPA:16.06.12.101.) However, per Idaho Code 39-1108, cities and local municipalities may elect to administer more stringent licensing requirements.

Each child in attendance is counted by the Department for the purposes of calculating maximum allowable points, counting the number of children in attendance, and for determining compliance with child-staff ratios. (IDAPA: 16.06.02.335.)

- Teacher/caregiver qualifications: Licensed Family Child Care home provider: All ICCP child care providers providing services must be eighteen (18) years old or older. Persons sixteen (16) or seventeen (17) years old may provide child care if they have direct, on-site supervision from a licensed child care provider who is at least eighteen (18) years old. Each provider must certify that he does not have a communicable disease or any physical or psychological condition that might pose a threat to the safety of a child in his care. All ICCP providers, employees, volunteers, and individuals age thirteen (13) or older who have direct contact with or provide care to children eligible for ICCP benefits must successfully receive clearance from a comprehensive criminal history and background check. Additionally, each owner or operator of a daycare center, group daycare facility, or family daycare home voluntarily licensed by the Department must receive and ensure that each staff member receives and completes Pediatric Rescue

Breathing, Infant-Child CPR, and Pediatric First Aid Treatment certification from a certified instructor. (IDAPA 16.06.02.330)

Other eligible providers:

All ICCP child care providers providing services must be eighteen (18) years old or older. Persons sixteen (16) or seventeen (17) years old may provide child care if they have direct, on-site supervision from a licensed child care provider who is at least eighteen (18) years old. Each provider must certify that he does not have a communicable disease or any physical or psychological condition that might pose a threat to the safety of a child in his care. All ICCP providers, employees, volunteers, and individuals age thirteen (13) or older who have direct contact with or provide care to children eligible for ICCP benefits must successfully receive clearance from a comprehensive criminal history and background check. Providers must ensure that at all times children are present at least one (1) adult on the premises has current certification in pediatric rescue breathing and first aid treatment from a certified instructor. (IDAPA 16.06.12.802.08.)

4. School-age

- How does the State/territory define school-age (age range):
A child five (5) years to under thirteen (13) years of age.
- Ratio: The maximum allowable child: staff ratio shall be a maximum of twelve (12) points per staff member using the following point system: (i) Each child in attendance under the age of twenty-four (24) months shall equal two (2) points. (ii) Each child in attendance from twenty-four (24) months to under thirty-six (36) months of age shall equal one and one-half (1 1/2) points. (iii) Each child in attendance from thirty-six (36) months to under five (5) years of age shall equal one (1) point. (iv) Each child in attendance from five (5) years to under thirteen (13) years of age shall equal one-half (1/2) point. (b) Each child in attendance shall be counted by the department for purposes of calculating maximum allowable points, counting the number of children in attendance and for determining compliance with child:staff ratios. (39-1109, Idaho Code.)
- Group size: Maximum group size for family child care is for six (6) or fewer children. (IDAPA:16.06.12.101.) However, per Idaho Code 39-1108, cities and local municipalities may elect to administer more stringent licensing requirements.

Group Daycare Facility. A group daycare facility license is issued for a place or facility providing daycare, where seven (7) to twelve (12) children, regardless of relationship to the person or persons providing the care, are in attendance. (IDAPA: 16.06.12.101.)

Maximum group size for family child care is for six (6) or fewer children. (IDAPA:16.06.12.101.) However, per Idaho Code 39-1108, cities and local municipalities may elect to administer more stringent licensing requirements.

Each child in attendance is counted by the Department for the purposes of

calculating maximum allowable points, counting the number of children in attendance, and for determining compliance with child-staff ratios. (IDAPA: 16.06.02.335.)

- Teacher/caregiver qualifications:

Licensed Family Child Care home provider:

All ICCP child care providers providing services must be eighteen (18) years old or older. Persons sixteen (16) or seventeen (17) years old may provide child care if they have direct, on-site supervision from a licensed child care provider who is at least eighteen (18) years old. Each provider must certify that he does not have a communicable disease or any physical or psychological condition that might pose a threat to the safety of a child in his care. All ICCP providers, employees, volunteers, and individuals age thirteen (13) or older who have direct contact with or provide care to children eligible for ICCP benefits must successfully receive clearance from a comprehensive criminal history and background check. Additionally, each owner or operator of a daycare center, group daycare facility, or family daycare home voluntarily licensed by the Department must receive and ensure that each staff member receives and completes Pediatric Rescue Breathing, Infant-Child CPR, and Pediatric First Aid Treatment certification from a certified instructor. (IDAPA 16.06.02.330)

Other eligible providers:

All ICCP child care providers providing services must be eighteen (18) years old or older. Persons sixteen (16) or seventeen (17) years old may provide child care if they have direct, on-site supervision from a licensed child care provider who is at least eighteen (18) years old. Each provider must certify that he does not have a communicable disease or any physical or psychological condition that might pose a threat to the safety of a child in his care. All ICCP providers, employees, volunteers, and individuals age thirteen (13) or older who have direct contact with or provide care to children eligible for ICCP benefits must successfully receive clearance from a comprehensive criminal history and background check. Providers must ensure that at all times children are present at least one (1) adult on the premises has current certification in pediatric rescue breathing and first aid treatment from a certified instructor. (IDAPA 16.06.12.802.08.)

5. If any of the responses above are different for exempt family child care homes, please describe which requirements apply to exempt homes.

Idaho does not exempt child care facilities.

- c) In-home CCDF providers:

1. Describe the ratios.

The maximum allowable child:staff ratio shall be a maximum of twelve (12) points per staff member using the following point system:

- (i) Each child in attendance under the age of twenty-four (24) months shall equal two (2) points.
- (ii) Each child in attendance from twenty-four (24) months to under thirty-six (36) months of age shall equal one and one-half (1 1/2) points.
- (iii) Each child in attendance from thirty-six (36) months to under five (5) years of age

shall equal one (1) point.

(iv) Each child in attendance from five (5) years to under thirteen (13) years of age shall equal one-half (1/2) point.

Each child in attendance shall be counted by the department for purposes of calculating maximum allowable points, counting the number of children in attendance and for determining compliance with child:staff ratios. (39-1109, Idaho Code.)

2. Describe the group size.

Maximum group size for family child care is for six (6) or fewer children. (IDAPA:16.06.12.101.) However, per Idaho Code 39-1108, cities and local municipalities may elect to administer more stringent licensing requirements.

3. Describe the maximum number of children that are allowed in the home at any one time. **Group Daycare Facility. A group daycare facility license is issued for a place or facility providing daycare, where seven (7) to twelve (12) children, regardless of relationship to the person or persons providing the care, are in attendance. (IDAPA: 16.06.12.101.)**

4. Describe if the state/territory requires related children to be included in the child-to-provider ratio or group size. **Maximum group size for family child care is for six (6) or fewer children. (IDAPA:16.06.12.101.) However, per Idaho Code 39-1108, cities and local municipalities may elect to administer more stringent licensing requirements.**

5. Describe any limits on infants and toddlers or additional school-age children that are allowed for part of the day. **Each child in attendance is counted by the Department for the purposes of calculating maximum allowable points, counting the number of children in attendance, and for determining compliance with child-staff ratios. (IDAPA: 16.06.02.335.)**

5.2.2 Health and safety standards for CCDF programs.

States and territories must establish health and safety standards for programs (e.g., child care centers, family child care homes, etc.) serving children receiving CCDF assistance relating to the topics listed below, as appropriate to the provider setting and age of the children served (98.41(a)). This requirement is applicable to all child care **programs** receiving CCDF funds regardless of licensing status (i.e., licensed or license-exempt). The only exception to this requirement is for providers who are caring for their own relatives because Lead Agencies have the option of exempting relatives from some or all CCDF health and safety requirements (98.42(c)).

- a) To certify, describe how the following health and safety standards for programs serving children receiving CCDF assistance are defined and established on the required topics (98.16(l)). Note – This question is different from the health and safety training requirements, which are addressed in question 5.2.3.

1. Prevention and control of infectious diseases (including immunization)

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)
801.HEALTH AND SAFETY TRAINING. All child care providers must complete a series of health and safety trainings during an orientation period of not more than ninety (90) days, in addition to ongoing annual training that address each of the following topics:

01. Infectious Diseases. The prevention and control of infectious diseases (including immunization).

105.ELIGIBLE CHILD. A family can only receive child care benefits for eligible children. A child is eligible for child care benefits under the following conditions:

01. Immunizations Requirements. A child must be immunized in accordance with IDAPA 16.02.11, “Immunization Requirements for Children Attending Licensed Daycare Facilities in Idaho.” Child care benefits can continue during a reasonable period necessary for the child to be immunized. Parents must provide evidence that the child has been immunized unless the child is attending school

- List all citations for these requirements, including those for licensed and license-exempt programs.
IDAPA 16.06.12.801.01, IDAPA 16.06.12.105.01
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). **N/A**
- Describe any variations based on the age of the children in care. **N/A**
- Describe if relatives are exempt from this requirement. **N/A**

2. Prevention of sudden infant death syndrome and the use of safe-sleep practices

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)
801.HEALTH AND SAFETY TRAINING. All child care providers must complete a series of health and safety trainings during an orientation period of not more than ninety (90) days, in addition to ongoing annual training that address each of the following topics:

02. Sudden Infant Death Syndrome. The prevention of sudden infant death syndrome and use of safe sleeping practices.

802.HEALTH AND SAFETY REQUIREMENTS. All providers must comply with the health and safety requirements listed in Subsections 802.01 through 802.13 of this rule. All providers must agree to an annual, unannounced health and safety inspection, with the exception of inhome child care described in Section 401 of these rules. Compliance with these standards does not exempt a provider from complying with stricter health and safety standards under state law, tribal law, local ordinance, or other applicable law.

14. Safe Sleep. Providers must place newborn infants to twelve (12) months in a safe sleep environment. Safe sleep practices include, alone, on their backs, and in a Consumer Product Safety Commission (CPSC) certified crib.

- List **all** citations for these requirements, **including those for licensed and license-exempt providers.**

IDAPA 16.06.12.802.14, IDAPA 16.06.12.801.02

- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). **N/A**
- Describe any variations based on the age of the children in care. **N/A**
- Describe if relatives are exempt from this requirement. **N/A**

3. Administration of medication, consistent with standards for parental consent

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

801.HEALTH AND SAFETY TRAINING. All child care providers must complete a series of health and safety trainings during an orientation period of not more than ninety (90) days, in addition to ongoing annual training that address each of the following topics:

08. Hazardous Substances. Proper handling, storage, and disposal of medicines, cleaning supplies, and other hazardous substances, including biocontaminants.

802.HEALTH AND SAFETY REQUIREMENTS. All providers must comply with the health and safety requirements listed in Subsections 802.01 through 802.13 of this rule. All providers must agree to an annual, unannounced health and safety inspection, with the exception of inhome child care described in Section 401 of these rules. Compliance with these standards does not exempt a provider from complying with stricter health and safety standards under state law, tribal law, local ordinance, or other applicable law.

04. Hazardous Substances. Medicines, cleaning supplies, and other hazardous substances must be handled safely and stored out of the reach of children. Biocontaminants must be disposed of appropriately.

- List **all** citations for these requirements, **including those for licensed and license-exempt providers.**

IDAPA 16.06.12.801.08, IDAPA 16.06.12.802.04

- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). **N/A**
- Describe any variations based on the age of the children in care. **N/A**
- Describe if relatives are exempt from this requirement. **N/A**

4. Prevention of and response to emergencies due to food and allergic reactions

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

801.HEALTH AND SAFETY TRAINING. All child care providers must complete a series of health and safety trainings during an orientation period of not more than ninety (90) days, in addition to ongoing annual training that address each of the following topics:

04. Allergic Reactions. The prevention of and response to emergencies due to food and allergic reactions.

802.HEALTH AND SAFETY REQUIREMENTS. All providers must comply with the health and safety requirements listed in Subsections 802.01 through 802.13 of this rule. All providers must agree to an annual, unannounced health and safety inspection, with the exception of inhome child care described in Section 401 of these rules. Compliance with these standards does not exempt a provider from complying with stricter health and safety standards under state law, tribal law, local ordinance, or other applicable law.

02. Sanitary Food Preparation. Food for use in child care facilities must be prepared and served in a sanitary manner. Utensils and food preparation surfaces must be cleaned and sanitized before using to prevent contamination

03. Food Storage. All food served in child care facilities must be stored to protect it from potential contamination.

- List all citations for these requirements, including those for licensed and license-exempt providers.

IDAPA 16.06.12.801.04, IDAPA 16.06.12.802.02, IDAPA 16.06.12.802.03

- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). **N/A**
- Describe any variations based on the age of the children in care. **N/A**
- Describe if relatives are exempt from this requirement. **N/A**

5. Building and physical premises safety, including the identification of and protection from hazards that can cause bodily injury, such as electrical hazards, bodies of water, and vehicular traffic

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

801.HEALTH AND SAFETY TRAINING. All child care providers must complete a series of health and safety trainings during an orientation period of not more than ninety (90) days, in addition to ongoing annual training that address each of the following topics:

05. Environmental Safety. Building and physical premises safety, including identification of and protection from hazards, bodies of water, and vehicular traffic.

802. HEALTH AND SAFETY REQUIREMENTS. All providers must comply with

the health and safety requirements listed in Subsections 802.01 through 802.13 of this rule. All providers must agree to an annual, unannounced health and safety inspection, with the exception of inhome child care described in Section 401 of these rules. Compliance with these standards does not exempt a provider from complying with stricter health and safety standards under state law, tribal law, local ordinance, or other applicable law.

13. Environmental Safety. Building and physical premises must be safe, including identification of and protection from hazards that can cause bodily injury including electrical hazards, bodies of water, and vehicular traffic.

- List all citations for these requirements, including those for licensed and license-exempt providers. IDAPA 16.06.12.801.05, IDAPA 16.06.12.802.13
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). N/A
- Describe any variations based on the age of the children in care. N/A
- Describe if relatives are exempt from this requirement. N/A

6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)
801.HEALTH AND SAFETY TRAINING. All child care providers must complete a series of health and safety trainings during an orientation period of not more than ninety (90) days, in addition to ongoing annual training that address each of the following topics:

06. Child Abuse Prevention. Prevention of shaken baby syndrome and abusive head trauma.

802. HEALTH AND SAFETY REQUIREMENTS. All providers must comply with the health and safety requirements listed in Subsections 802.01 through 802.13 of this rule. All providers must agree to an annual, unannounced health and safety inspection, with the exception of inhome child care described in Section 401 of these rules. Compliance with these standards does not exempt a provider from complying with stricter health and safety standards under state law, tribal law, local ordinance, or other applicable law.

10. Child Abuse. Providers must report suspected child abuse to the appropriate authority.

- List all citations for these requirements, including those for licensed and license-exempt providers.
IDAPA 16.06.12.801.06, IDAPA 16.06.12.802.10
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). N/A
- Describe any variations based on the age of the children in care. N/A
- Describe if relatives are exempt from this requirement. N/A

7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a)(1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1)). Emergency preparedness and response planning (at the child care provider level) must also include procedures for evacuation; relocation; shelter-in-place and lockdown; staff and volunteer training and practice drills; communications and reunification with families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions.

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

05. Emergency Communication. A telephone or some type of emergency communication system is required.

07. Emergency Preparedness. Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-caused event.

12. Disaster and Emergency Planning. Providers must have documented policies and procedures planning for emergencies resulting from a natural disaster, or man-caused event that include:

a. Evacuation, relocation, shelter-in-place, and lock-down procedures, and procedures for communication and reunification with families, continuity of operations, and accommodation of infants and toddlers, children with disabilities, and children with chronic medical conditions.

b. Procedures for staff and volunteer emergency preparedness training and practice drills.

c. Guidelines for the continuation of child care services in the period following the emergency or disaster.

- List all citations for these requirements, including those for licensed and license-exempt providers.

IDAPA 16.06.12.801.07, IDAPA 16.06.12.802.05, IDAPA 16.06.12..802.12

- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). **N/A**
- Describe any variations based on the age of the children in care. **N/A**
- Describe if relatives are exempt from this requirement. **N/A**

8. Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

08. Hazardous Substances. Proper handling, storage, and disposal of medicines, cleaning supplies, and other hazardous substances, including biocontaminants.

04. Hazardous Substances. Medicines, cleaning supplies, and other hazardous

substances must be handled safely and stored out of the reach of children.
Biocontaminants must be disposed of appropriately.

- List all citations for these requirements, including those for licensed and license-exempt providers.

IDAPA 16.06.12.801.08, IDAPA 16.06.12.802.04

- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). **N/A**
- Describe any variations based on the age of the children in care. **N/A**
- Describe if relatives are exempt from this requirement. **N/A**

9. Precautions in transporting children (if applicable)

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

09. Transportation. Appropriate precautions in transporting children, including the use of child safety restraints and seat belts.

11. Transportation. Providers who transport children as part of their child care operations must operate safely and legally, using child safety restraints and seat belts as required by state and local statutes.

- List all citations for these requirements, including those for licensed and license-exempt providers.

IDAPA 16.06.12.801.09, IDAPA 16.06.12.802.11

- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). **N/A**
- Describe any variations based on the age of the children in care. **N/A**
- Describe if relatives are exempt from this requirement. **N/A**

10. Pediatric first aid and cardiopulmonary resuscitation (CPR) certification

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

08. CPR/First Aid. Providers must insure that at all times children are present at least one (1) adult on the premises has current certification in pediatric rescue breathing (CPR) and pediatric first aid treatment from a certified instructor.

803.CHILD CARE PROVIDER TRAINING REQUIREMENTS. Each child care provider must receive and ensure that each staff member who provides child care receives and completes twelve (12) hours of ongoing training every twelve (12) months after the staff member's date of hire.

01. Training Contents. Training must be related to continuing education in child development, teaching and curriculum, health and safety, and business practices. Pediatric rescue breathing (CPR) and pediatric first aid treatment training will not count towards the required twelve (12) hours of annual training.

- List **all** citations for these requirements, **including those for licensed and license-exempt providers.**

IDAPA 16.06.12.802.08, IDAPA 16.06.12.803.01

- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). **N/A**
- Describe any variations based on the age of the children in care. **N/A**
- Describe if relatives are exempt from this requirement. **N/A**

11. Recognition and reporting of child abuse and neglect

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)
801.HEALTH AND SAFETY TRAINING. All child care providers must complete a series of health and safety trainings during an orientation period of not more than ninety (90) days, in addition to ongoing annual training that address each of the following topics:

06. Child Abuse Prevention. Prevention of shaken baby syndrome and abusive head trauma.

802. HEALTH AND SAFETY REQUIREMENTS. All providers must comply with the health and safety requirements listed in Subsections 802.01 through 802.13 of this rule. All providers must agree to an annual, unannounced health and safety inspection, with the exception of inhome child care described in Section 401 of these rules. Compliance with these standards does not exempt a provider from complying with stricter health and safety standards under state law, tribal law, local ordinance, or other applicable law.

10. Child Abuse. Providers must report suspected child abuse to the appropriate authority.

- List **all** citations for these requirements, **including those for licensed and license-exempt providers**

IDAPA 16.06.12.801.06, IDAPA 16.06.12.802.10.

- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). **N/A**
- Describe any variations based on the age of the children in care. **N/A**
- Describe if relatives are exempt from this requirement. **N/A**

b) Does the Lead Agency include any of the following optional standards?

- ☒ No, if no, skip to 5.2.3.
- ☐ Yes, if yes provide the information related to the optional standards addressed.

1. Nutrition

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

- List **all** citations for these requirements, **including those for licensed and license-exempt providers.**
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
- **Describe any variations based on the ages of the children in care.**
- Describe if relatives are exempt from this requirement.

2. Access to physical activity

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)
- List **all** citations for these requirements, **including those for licensed and license-exempt providers.**
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
- **Describe any variations based on the ages of the children in care.**
- Describe if relatives are exempt from this requirement.

3. Caring for children with special needs

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)
- List **all** citations for these requirements, **including those for licensed and license-exempt providers.**
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
- **Describe any variations based on the ages of the children in care.**
- Describe if relatives are exempt from this requirement.

4. Any other areas determined necessary to promote child development or to protect children's health and safety (98.44(b)(1)(iii)). Describe:

- Provide a brief summary of how the standard(s) is defined (i.e., what is the standard, content covered, practices required, etc.)
- List **all** citations for these requirements, **including those for licensed and license-exempt providers.**
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
- **Describe any variations based on the ages of the children in care.**
- Describe if relatives are exempt from this requirement.

5.2.3 Health and safety training for CCDF providers on required topics.

Lead Agencies are required to have minimum pre-service or orientation training requirements (to be completed within 3 months), as appropriate to the provider setting and the age of children served, that address the health and safety topics described in 5.2.2, and child development. Lead Agencies must also have ongoing training requirements on the health and safety topics for caregivers, teachers, and directors of children receiving CCDF funds (658E(c)(2)(I)(i); 98.44(b)(1)(iii)). The state/territory must describe its requirements for pre-

service or orientation training and ongoing training. These trainings should be part of a broader systematic approach and progression of professional development (as described in section 6) within a state/territory. Lead Agencies have flexibility in determining the number of training hours to require, but they may consult with *Caring for our Children Basics* for best practices and the recommended time needed to address these training requirements.

Pre-Service or Orientation Training Requirements

- a) Provide the minimum number of pre-service or orientation training hours on health and safety topics for caregivers, teachers, and directors required for the following:
 1. Licensed child care centers: **12 hours**
 2. Licensed FCC homes: **12 hours**
 3. In-home care: **12 hours**
 4. Variations for exempt provider settings:
- b) Provide the length of time that providers have to complete trainings subsequent to being hired (must be 3 months or fewer). **All CCDF child care providers must complete a series of health and safety trainings during an orientation period of not more than ninety (90) days, in addition to ongoing annual training. (IDAPA 16.06.12.801)**
- c) Explain any differences in pre-service or orientation training requirements based on the ages of the children served. **Pre-service training requirements are the same for all age groups served.**
- d) Describe how the training is offered, including any variations in delivery (e.g. across standards, in rural areas, etc.) Note: There is no federal requirement on how a training must be delivered. **All required trainings are provided free of charge online. Optional in-person versions of the trainings are conducted as needed for providers for whom English is a Second Language, and providers with individual barriers.**
- e) Identify below the pre-service or orientation training requirements for each topic (98.41(a)(1)(i through xi)).
 1. Prevention and control of infectious diseases (including immunizations)

Provide the citation(s) for this training requirement, **including citations for both licensed and license-exempt providers. IDAPA 16.06.12.801.01 Infectious Diseases. The prevention and control of infectious diseases (including immunization).**

- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors **in licensed CCDF programs** are allowed to care for children unsupervised?
☐ Yes
☒ No
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors **in license-exempt CCDF programs** are allowed to care for children unsupervised?
☐ Yes

☒ No

- Describe if relatives are exempt from this requirement. There are no exemptions from the required Health and Safety Trainings.

2. Prevention of sudden infant death syndrome and the use of safe-sleep practices

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. IDAPA 16.06.12.801.02. Sudden Infant Death Syndrome. The prevention of sudden infant death syndrome and use of safe sleeping practices.
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?
☐ Yes
☒ No
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
☐ Yes
☒ No
- Describe if relatives are exempt from this requirement. There are no exemptions from the required Health and Safety Trainings.

3. Administration of medication, consistent with standards for parental consent

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. IDAPA 16.06.12.801.03. Medication. The administration of medication, consistent with standards for parental consent.
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?
☐ Yes
☒ No
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
☐ Yes
☒ No
- Describe if relatives are exempt from this requirement. There are no exemptions from the required Health and Safety Trainings.

4. Prevention and response to emergencies due to food and allergic reactions

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. IDAPA 16.06.12.801.04. Allergic

Reactions. The prevention of and response to emergencies due to food and allergic reactions.

- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors **in licensed CCDF programs** are allowed to care for children unsupervised?
☐ Yes
☒ No
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors **in license-exempt CCDF programs** are allowed to care for children unsupervised?
☐ Yes
☒ No
- **Describe if relatives are exempt from this requirement. There are no exemptions from the required Health and Safety Trainings.**

5. Building and physical premises safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic

- Provide the citation(s) for this training requirement, **including citations for both licensed and license-exempt providers. IDAPA 16.06.12.801.05. Environmental Safety. Building and physical premises safety, including identification of and protection from hazards, bodies of water, and vehicular traffic.**
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors **in licensed CCDF programs** are allowed to care for children unsupervised?
☐ Yes
☒ No
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors **in license-exempt CCDF programs** are allowed to care for children unsupervised?
☐ Yes
☒ No
- **Describe if relatives are exempt from this requirement. There are no exemptions from the required Health and Safety Trainings.**

6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment

- Provide the citation(s) for this training requirement, **including citations for both licensed and license-exempt providers. IDAPA 16.06.12.801.06. Child Abuse Prevention. Prevention of shaken baby syndrome and abusive head trauma.**
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors **in licensed CCDF programs** are allowed to care for children unsupervised?
☐ Yes
☒ No

- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors **in license-exempt CCDF programs** are allowed to care for children unsupervised?
 - ☐ Yes
 - ☒ No
 - **Describe if relatives are exempt from this requirement. There are no exemptions from the required Health and Safety Trainings.**
7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event
- Provide the citation(s) for this training requirement, **including citations for both licensed and license-exempt providers. IDAPA 16.06.12.801.07. Emergency Preparedness. Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-caused event.**
 - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors **in licensed CCDF programs** are allowed to care for children unsupervised?
 - ☐ Yes
 - ☒ No
 - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors **in license-exempt CCDF programs** are allowed to care for children unsupervised?
 - ☐ Yes
 - ☒ No
 - **Describe if relatives are exempt from this requirement. There are no exemptions from the required Health and Safety Trainings.**
8. Handling and storage of hazardous materials and the appropriate disposal of bio contaminants
- Provide the citation(s) for this training requirement, **including citations for both licensed and license-exempt providers. IDAPA 16.06.12.801.08. Hazardous Substances. Proper handling, storage, and disposal of medicines, cleaning supplies, and other hazardous substances, including biocontaminants.**
 - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors **in licensed CCDF programs** are allowed to care for children unsupervised?
 - ☐ Yes
 - ☒ No
 - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors **in license-exempt CCDF programs** are allowed to care for children unsupervised?
 - ☐ Yes
 - ☒ No

- Describe if relatives are exempt from this requirement. There are no exemptions from the required Health and Safety Trainings.

9. Appropriate precautions in transporting children (if applicable)

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. IDAPA 16.06.12.801.07. Transportation. Appropriate precautions in transporting children, including the use of child safety restraints and seat belts.
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?
 - ☐ Yes
 - ☒ No
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
 - ☐ Yes
 - ☒ No
- Describe if relatives are exempt from this requirement. There are no exemptions from the required Health and Safety Trainings.

10. Pediatric first aid and CPR certification

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. IDAPA 16.06.12.802.08. CPR/First Aid. Providers must insure that at all times children are present at least one (1) adult on the premises has current certification in pediatric rescue breathing (CPR) and pediatric first aid treatment from a certified instructor.
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?
 - ☒ Yes
 - ☐ No
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
 - ☐ Yes
 - ☒ No
- Describe if relatives are exempt from this requirement. There are no exemptions from the required Health and Safety Trainings.

11. Recognition and reporting of child abuse and neglect

- Provide the citation(s) for this training requirement, **including citations for both licensed and license-exempt providers. IDAPA 16.06.12.801.06. Child Abuse Prevention. Prevention of shaken baby syndrome and abusive head trauma. IDAPA 16.06.12.802.10. Child Abuse. Providers must report suspected child abuse to the appropriate authority**
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors **in licensed CCDF programs** are allowed to care for children unsupervised?
 - ☐ Yes
 - ☒ No
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors **in license-exempt CCDF programs** are allowed to care for children unsupervised?
 - ☐ Yes
 - ☒ No
- **Describe if relatives are exempt from this requirement. There are no exemptions from the required Health and Safety Trainings.**

12. Child development (98.44(b)(1)(iii))

- Provide the citation(s) for this training requirement, **including citations for both licensed and license-exempt providers. IDAPA 16.06.12.803.01. Training Contents. Training must be related to continuing education in child development, teaching and curriculum, health and safety, and business practices**
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors **in licensed CCDF programs** are allowed to care for children unsupervised?
 - ☐ Yes
 - ☒ No
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors **in license-exempt CCDF programs** are allowed to care for children unsupervised?
 - ☐ Yes
 - ☒ No
- **Describe if relatives are exempt from this requirement. There are no exemptions from the required Health and Safety Trainings.**

13. Describe other training requirements, **such as nutrition, physical activities, caring for children with special needs, etc. N/A**

- Provide the citation(s) for other training requirements, **including citations for both licensed and license-exempt providers.**

- Does the state/territory require that this training topic(s) be completed before caregivers, teachers, and directors in **licensed CCDF programs** are allowed to care for children unsupervised?
☐ Yes
☐ No
- Does the state/territory require that this training topic(s) be completed before caregivers, teachers, and directors in **license-exempt CCDF programs** are allowed to care for children unsupervised?
☐ Yes
☐ No
- Describe if relatives are exempt from this requirement.

Ongoing Training Requirements

5.2.4 Provide the minimum number of annual training hours on health and safety topics for caregivers, teachers, and directors required for the following.

- a) Licensed child care centers: **4 hours**
- b) Licensed FCC homes: **4 hours**
- c) In-home care: **Zero Hours**
- d) Variations for exempt provider settings:

5.2.5 Describe the ongoing health and safety training for CCDF providers by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

1. Prevention and control of infectious diseases (including immunizations)
 - Provide the citation(s) for this training requirement, **including citations for both licensed and license-exempt providers. IDAPA Rules: 16.06.12.803**
 - How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in **licensed CCDF programs**?
☒ Annually.
☐ Other. Describe
 - How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in **license-exempt CCDF programs**?
☒ Annually.
☐ Other. Describe
2. Prevention of sudden infant death syndrome and the use of safe-sleep practices
 - Provide the citation(s) for this training requirement, **including citations for both licensed and license-exempt providers. IDAPA Rules: 16.06.12.803**
 - How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in **licensed CCDF programs**?

- ☒ Annually.

☐ Other. Describe
 - How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs?

☒ Annually.

☐ Other. Describe
3. Administration of medication, consistent with standards for parental consent
- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. IDAPA Rules: 16.06.12.803
 - How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

☒ Annually.

☐ Other. Describe
 - How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs?

☒ Annually.

☐ Other. Describe
4. Prevention and response to emergencies due to food and allergic reactions
- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers IDAPA Rules: 16.06.12.803.
 - How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

☒ Annually.

☐ Other. Describe
 - How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs?

☒ Annually.

☐ Other. Describe
5. Building and physical premises safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic
- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. IDAPA Rules: 16.06.12.803
 - How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

☒ Annually.

☐ Other. Describe
 - How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs?

- ☒ Annually.
- ☐ Other. Describe

6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment

- Provide the citation(s) for this training requirement, **including citations for both licensed and license-exempt providers IDAPA Rules: 16.06.12.803**
- How often does the state/territory require that this training topic be completed **by caregivers, teachers, and directors in licensed CCDF programs?**
 - ☒ Annually.
 - ☐ Other. Describe
- How often does the state/territory require that this training topic be completed **by caregivers, teachers, and directors in license-exempt CCDF programs?**
 - ☒ Annually.
 - ☐ Other. Describe

7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event

- Provide the citation(s) for this training requirement, **including citations for both licensed and license-exempt providers IDAPA Rules: 16.06.12.803.**
- How often does the state/territory require that this training topic be completed **by caregivers, teachers, and directors in licensed CCDF programs?**
 - ☒ Annually.
 - ☐ Other. Describe
- How often does the state/territory require that this training topic be completed **by caregivers, teachers, and directors in license-exempt CCDF programs?**
 - ☒ Annually.
 - ☐ Other. Describe

8. Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants

- Provide the citation(s) for this training requirement, **including citations for both licensed and license-exempt providers IDAPA Rules: 16.06.12.803.**
- How often does the state/territory require that this training topic be completed **by caregivers, teachers, and directors in licensed CCDF programs?**
 - ☒ Annually.
 - ☐ Other. Describe
- How often does the state/territory require that this training topic be completed **by caregivers, teachers, and directors in license-exempt CCDF programs?**
 - ☒ Annually.
 - ☐ Other. Describe

9. Appropriate precautions in transporting children (if applicable)

- Provide the citation(s) for this training requirement, **including citations for both licensed and license-exempt providers IDAPA Rules: 16.06.12.803.**
- How often does the state/territory require that this training topic be completed **by caregivers, teachers, and directors in licensed CCDF programs?**
 - ☒ Annually.
 - ☐ Other. Describe
- How often does the state/territory require that this training topic be completed **by caregivers, teachers, and directors in license-exempt CCDF programs?**
 - ☒ Annually.
 - ☐ Other. Describe

10. Pediatric first aid and CPR certification

- Provide the citation(s) for this training requirement, **including citations for both licensed and license-exempt providers IDAPA Rules: 16.06.12.803.**
- How often does the state/territory require that this training topic be completed **by caregivers, teachers, and directors in licensed CCDF programs?**
 - ☒ Annually.
 - ☐ Other. Describe
- How often does the state/territory require that this training topic be completed **by caregivers, teachers, and directors in license-exempt CCDF programs?**
 - ☒ Annually.
 - ☐ Other. Describe

11. Recognition and reporting of child abuse and neglect

- Provide the citation(s) for this training requirement, **including citations for both licensed and license-exempt providers. IDAPA Rules: 16.06.12.803**
- How often does the state/territory require that this training topic be completed **by caregivers, teachers, and directors in licensed CCDF programs?**
 - ☒ Annually.
 - ☐ Other. Describe
- How often does the state/territory require that this training topic be completed **by caregivers, teachers, and directors in license-exempt CCDF programs?**
 - ☒ Annually.
 - ☐ Other. Describe

12. Child development (98.44(b)(1)(iii))

- Provide the citation(s) for this training requirement, **including citations for both licensed and license-exempt providers IDAPA Rules: 16.06.12.803.**
- How often does the state/territory require that this training topic be completed **by caregivers, teachers, and directors in licensed CCDF programs?**

- ☒ Annually.
- ☐ Other. Describe
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs?
 - ☒ Annually.
 - ☐ Other. Describe

13. Describe other requirements, such as nutrition, physical activities, caring for children with special needs, etc.

- Provide the citation(s) for other training requirements, including citations for both licensed and license-exempt providers IDAPA Rules: 16.06.12.803.
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?
 - ☒ Annually.
 - ☐ Other. Describe
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs?
 - ☒ Annually.
 - ☐ Other. Describe

5.3 Monitoring and Enforcement Policies and Practices for CCDF Providers

5.3.1 Enforcement of licensing and health and safety requirements

Lead agencies must certify that procedures are in effect to ensure that child care providers caring for children receiving CCDF services comply with all applicable State and local health and safety requirements, including those described in 98.41 (98.42(a)). This may include, but is not limited to, any systems used to ensure that providers complete health and safety trainings, any documentation required to be maintained by child care providers or any other monitoring procedures to ensure compliance. Note: Inspection requirements are described starting in 5.3.2.

To certify, describe the procedures to ensure that CCDF providers comply with all applicable State and local health and safety requirements. **CHILD CARE PROVIDER LICENSING. All providers of child care who receive a Department subsidy must be licensed or must comply with: applicable State Daycare licensing requirements in Title 39, Chapter 11, Idaho Code; these rules; local licensing ordinances; or tribal ordinances. If both state requirements and ordinances apply to a provider, the provider must comply with the stricter requirement. A provider operating outside Idaho must comply with the licensing laws of his state or locality. (IDAPA 16.06.12.800) Child care provider eligibility is monitored by Vendor Specialists at IdahoSTARS, and verified by semi-annual contract monitoring conduction by DHW staff. Vendor Specialists gather verifications of the completion of all required health and safety inspections, trainings, and certifications. Verifications are maintained in each provider's digital file. IdahoSTARS staff monitor upcoming expiration dates and communicate the need for updated verifications 90 days and 30 days prior to the provider becoming ineligible for subsidy due to non-compliance.**

5.3.2 Inspections for licensed CCDF providers.

Lead agencies must require licensing inspectors to perform inspections—with no fewer than one pre-licensure inspection for compliance with health, safety, and fire standards—of each child care provider and facility in the state/territory. Licensing inspectors are required to perform no fewer than one annual, unannounced inspection of each licensed CCDF provider for compliance with all child care licensing standards; it shall include an inspection for compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards; inspectors may inspect for compliance with all three standards—health, safety, and fire—at the same time (658E(c)(2)(K)(i)(II); 98.16 (n); 98.42(b)(2)(i)).

Certify by responding to the questions below to describe your state/territory's monitoring and enforcement procedures to ensure that licensed child care providers comply with licensing standards, including compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards.

a) Licensed CCDF center-based child care

1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed child care center providers for compliance with health, safety, and fire standards. **Environmental Health Specialists from each health district conduct pre-licensure inspections for compliance with health and safety standards in all licensed child care facilities. Additionally, the provider must submit a passing fire inspection conducted by their local fire authority, prior to the issuance of a license. (IDAPA 16.06.12.802) All licensed providers must agree to a health and safety inspection. Compliance with these standards does not exempt a provider from complying with stricter health and safety standards under state law, tribal law, local ordinance, or other applicable law. Per requirements in Rules Governing the Idaho Child Care Program (ICCP) (IDAPA: 16.06.12) and Standards for Child Care Licensing (IDAPA: 16.06.02) child care providers participating with ICCP are subject to a pre-service inspection, as well as an annual inspection that are unscheduled. Additional inspections may be conducted at any time at the request of the Idaho Child Care Program.**
2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF child care center providers. **Environmental Health Specialists from each health district conduct annual unannounced inspections for compliance with health and safety standards in all ICCP participating child care facilities. (IDAPA 16.06.12.802) State licensed child care providers, who are not participating with ICCP, are subject to biannual unannounced inspections. (Idaho Statute 39-1106) All child care homes/facilities must pass at least one (1) yearly health and safety inspection conducted as an on-site visit to their facility. These are unscheduled visits. Providers cannot deny the health inspector access or entry to any part of the child care facility. Note: In-home care is required to have a health and safety training. (HW0220 Idaho Child Care Program- Provider Agreement)**
3. Identify the frequency of unannounced inspections:
 - ☒ Once a year
 - ☐ More than once a year. Describe
4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that child care center providers comply with the

applicable licensing standards, including health, safety, and fire standards.

Environmental Health Specialists from each health district conduct annual unannounced inspections for compliance with health and safety standards in all ICCP participating child care facilities. Each inspection reviews 31 health, safety, and fire standards detailed in the District Health Department's Idaho Child Care Management Manual. The manual includes policy citations for each standard.

List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF center providers **Idaho Statute 39-1104: APPLICATION FOR LICENSE — FIRE SAFETY AND HEALTH INSPECTIONS. (1) Application. A person who wishes to operate a daycare facility shall be a minimum of eighteen (18) years of age, shall submit an application on the forms provided by the department, and shall obtain the required certificates of inspection as provided herein. (2) Inspections. A person who wishes to operate a daycare facility shall submit: (a) a certificate of a fire inspection of the proposed center, conducted by a fire department or fire district official, establishing compliance with the minimum standards specified in section 39-1109, Idaho Code; and (b) a health and safety inspection of the proposed facility conducted by a qualified inspector as designated by the department, establishing compliance with the minimum standards specified in sections 39-1109 and 39-1110, Idaho Code.**

(3) Continued compliance and reinspection. Daycare facilities shall at all times maintain compliance with the safety and health requirements identified in this chapter. The department may cause any daycare facility to be reinspected during the term of a license for safety and health compliance as determined necessary by the department. No charge for any reinspection after the initial inspection in any license period shall be made to the daycare facility.

Idaho Statute 39-1106: ISSUANCE OF LICENSE — RENEWAL. (1) Upon receipt of the application, inspection certificates and the criminal history, the department shall, upon a finding of compliance with the minimum standards set forth in this chapter, issue a basic daycare license to the applicant. The license shall be valid for two (2) years and shall be posted in a conspicuous place at the daycare facility.

IDAPA 16.06.12.802. HEALTH AND SAFETY REQUIREMENTS. All providers must comply with the health and safety requirements listed in Subsections 802.01 through 802.13 of this rule. All providers must agree to an annual, unannounced health and safety inspection, with the exception of inhome child care described in Section 401 of these rules. Compliance with these standards does not exempt a provider from complying with stricter health and safety standards under state law, tribal law, local ordinance, or other applicable law.

IDAPA 16.06.12.401. IN-HOME CARE HEALTH AND SAFETY REQUIREMENTS. Each in-home care provider is responsible to ensure that health and safety requirements are met for children being cared for in the children's own home.

IDAPA 16.06.12.401.01. Health and Safety Inspections. In-home health and safety inspections, described in Section 802 of these rules, are not required for in-home care providers caring for children in the children's own home.

IDAPA 16.06.12.401.02. Health and Safety Training. Because in-home care providers are exempt from health and safety inspections, each in-home care

provider must annually complete health and safety training provided by the local Health District covering requirements listed in Section 802 of these rules.

b) Licensed CCDF family child care home

1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed family child care providers for compliance with health, safety, and fire standards
Environmental Health Specialists from each health district conduct pre-licensure inspections for compliance with health and safety standards in all licensed child care facilities. Additionally, the provider must submit a passing fire inspection conducted by their local fire authority, prior to the issuance of a license. (IDAPA 16.06.12.802) All licensed providers must agree to a health and safety inspection. Compliance with these standards does not exempt a provider from complying with stricter health and safety standards under state law, tribal law, local ordinance, or other applicable law. Per requirements in Rules Governing the Idaho Child Care Program (ICCP) (IDAPA: 16.06.12) and Standards for Child Care Licensing (IDAPA: 16.06.02) child care providers participating with ICCP are subject to a pre-service inspection, as well as an annual inspection that are unscheduled. Additional inspections may be conducted at any time at the request of the Idaho Child Care Program. .
2. Describe your state/territory's requirements for at least annual, unannounced inspections of licensed CCDF family child care providers.
Environmental Health Specialists from each health district conduct annual unannounced inspections for compliance with health and safety standards in all ICCP participating child care facilities. (IDAPA 16.06.12.802) State licensed child care providers, who are not participating with ICCP, are subject to biannual unannounced inspections. (Idaho Statute 39-1106) All child care homes/facilities must pass at least one (1) yearly health and safety inspection conducted as an on-site visit to their facility. These are unscheduled visits. Providers cannot deny the health inspector access or entry to any part of the child care facility. Note: In-home care is required to have a health and safety training. (HW0220 Idaho Child Care Program- Provider Agreement)
3. Identify the frequency of unannounced inspections:
☒ Once a year
☐ More than once a year. Describe
4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that CCDF family child care providers comply with the applicable licensing standards, including health, safety, and fire standards.
Environmental Health Specialists from each health district conduct annual unannounced inspections for compliance with health and safety standards in all ICCP participating child care facilities. Each inspection reviews 31 health, safety, and fire standards detailed in the District Health Department's Idaho Child Care Management Manual. The manual includes policy citations for each standard. List the citation(s) for your state/territory'
Idaho Statute 39-1104: APPLICATION FOR LICENSE — FIRE SAFETY AND HEALTH INSPECTIONS. (1) Application. A person who wishes to operate a daycare facility shall be a minimum of eighteen (18) years of age, shall submit an application on

the forms provided by the department, and shall obtain the required certificates of inspection as provided herein. (2) Inspections. A person who wishes to operate a daycare facility shall submit: (a) a certificate of a fire inspection of the proposed center, conducted by a fire department or fire district official, establishing compliance with the minimum standards specified in section 39-1109, Idaho Code; and (b) a health and safety inspection of the proposed facility conducted by a qualified inspector as designated by the department, establishing compliance with the minimum standards specified in sections 39-1109 and 39-1110, Idaho Code. (3) Continued compliance and reinspection. Daycare facilities shall at all times maintain compliance with the safety and health requirements identified in this chapter. The department may cause any daycare facility to be reinspected during the term of a license for safety and health compliance as determined necessary by the department. No charge for any reinspection after the initial inspection in any license period shall be made to the daycare facility.

Idaho Statute 39-1106: ISSUANCE OF LICENSE — RENEWAL. (1) Upon receipt of the application, inspection certificates and the criminal history, the department shall, upon a finding of compliance with the minimum standards set forth in this chapter, issue a basic daycare license to the applicant. The license shall be valid for two (2) years and shall be posted in a conspicuous place at the daycare facility.

IDAPA 16.06.12.802. HEALTH AND SAFETY REQUIREMENTS. All providers must comply with the health and safety requirements listed in Subsections 802.01 through 802.13 of this rule. All providers must agree to an annual, unannounced health and safety inspection, with the exception of inhome child care described in Section 401 of these rules. Compliance with these standards does not exempt a provider from complying with stricter health and safety standards under state law, tribal law, local ordinance, or other applicable law.

IDAPA 16.06.12.401. IN-HOME CARE HEALTH AND SAFETY REQUIREMENTS. Each in-home care provider is responsible to ensure that health and safety requirements are met for children being cared for in the children's own home.

IDAPA 16.06.12.401.01. Health and Safety Inspections. In-home health and safety inspections, described in Section 802 of these rules, are not required for in-home care providers caring for children in the children's own home.

IDAPA 16.06.12.401.02. Health and Safety Training. Because in-home care providers are exempt from health and safety inspections, each in-home care provider must annually complete health and safety training provided by the local Health District covering requirements listed in Section 802 of these rules.

c) Licensed in-home CCDF child care

- ☒ N/A. In-home CCDF child care (care in the child's own home) is not licensed in the state/territory. [Skip to 5.3.2 \(d\)](#).

1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed in-home child care providers for compliance with health, safety, and fire standards.



2. Describe your state/territory's requirements for at least annual, unannounced inspections of licensed CCDF in-home child care providers. [\[Link\]](#)
 3. Identify the frequency of unannounced inspections:
 - ☐ Once a year
 - ☐ More than once a year. Describe [\[Link\]](#)
 4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that in-home CCDF child care providers comply with the applicable licensing standards, including health, safety, and fire standards. [\[Link\]](#)
 5. List the citation(s) for your state/territory's policies regarding inspections for licensed in-home CCDF providers [\[Link\]](#)
- d) List the entity(ies) in your state/territory that is responsible for conducting pre-licensure inspections and unannounced inspections of licensed CCDF providers. **Environmental Health Specialists from each health district conduct pre-licensure and unannounced inspections for compliance with health and safety standards in all ICCP participating, and licensed child care facilities.**

5.3.3 Inspections for license-exempt CCDF providers

The Lead Agency must have policies and practices that require licensing inspectors (or qualified monitors designated by the Lead Agency) to perform an annual monitoring visit of each license-exempt CCDF provider for compliance with health, safety, and fire standards (658E(c)(2)(K)(i)(IV); 98.42(b)(2)(ii)). The state/territory may determine if exempt relative providers (as described in section (658P(6)(B)) do not need to meet this requirement. At a minimum, the health and safety requirements to be inspected must address the standards listed in 5.1.4 (98.41(a)). To certify, describe the policies and practices for the annual monitoring of:

- a) License-exempt center-based CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used. **Idaho does not allow exemption of center-based CCDF providers from licensing requirements.**

Provide the citation(s) for this policy or procedure. [Click or tap here to enter text.](#)

- b) License-exempt family child care CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used. **Environmental Health Specialists from each health district conduct annual unannounced inspections for compliance with health and safety standards in all ICCP participating child care facilities. Each inspection reviews 31 health, safety, and fire standards detailed in the District Health Department's Idaho Child Care Management Manual. The manual includes policy citations for each standard. Differential monitoring is not currently utilized in Idaho.**

Provide the citation(s) for this policy or procedure. **IDAPA 16.06.12.802. HEALTH AND SAFETY REQUIREMENTS. All providers must comply with the health and safety requirements listed in Subsections 802.01 through 802.13 of this rule. All providers must agree to an annual, unannounced health and safety inspection, with the exception of in home child care described in Section 401 of these rules. Compliance with these standards does not exempt a provider from complying with stricter health and safety standards under state law, tribal law, local ordinance, or other applicable law.**

- c) License-exempt in-home CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, if relative care is exempt from monitoring, and if differential monitoring is used. **Each in-home care provider must annually complete health and safety training provided by the local Health District, conducted by an Environmental Health Specialist. The training is conducted at the location where child care is provided and reviews 31 health, safety, and fire standards detailed in the District Health Department's Idaho Child Care Management Manual. The manual includes policy citations for each standard. Differential monitoring is not currently utilized in Idaho.**

Provide the citation(s) for this policy or procedure. **IDAPA 16.06.12.401. IN-HOME CARE HEALTH AND SAFETY REQUIREMENTS. Each in-home care provider is responsible to ensure that health and safety requirements are met for children being cared for in the children's own home. IDAPA 16.06.12.401.01. Health and Safety Inspections. In-home health and safety inspections, described in Section 802 of these rules, are not required for in-home care providers caring for children in the children's own home. IDAPA 16.06.12.401.02. Health and Safety Training. Because in-home care providers are exempt from health and safety inspections, each in-home care provider must annually complete health and safety training provided by the local Health District covering requirements listed in Section 802 of these rules.**

- d) **Lead Agencies have the option to develop alternate monitoring requirements for care provided in the child's home (98.42(b)(2)(iv)(B)). Does your state use alternate monitoring procedures for monitoring in-home care?**

☐ No

☒ Yes. If yes, describe: **Each in-home care provider must annually complete health and safety training provided by the local Health District, conducted by an Environmental Health Specialist. The training is conducted at the location where child care is provided and reviews 31 health, safety, and fire standards detailed in the District Health Department's Idaho Child Care Management Manual. The manual includes policy citations for each standard. Differential monitoring is not currently utilized in Idaho.**

- e) **List the entity(ies) in your state/territory that are responsible for conducting inspections of license-exempt CCDF providers: Environmental Health Specialists from each health district conduct pre-licensure and unannounced inspections for compliance with health and safety standards in all ICCP participating, and licensed child care facilities.**

5.3.4 Licensing inspectors.

Lead Agencies will have policies and practices that ensure that individuals who are hired as licensing inspectors **(or qualified monitors designated by the Lead Agency)** are qualified to inspect child care providers and facilities and have received health and safety training appropriate to the provider setting and age of the children served. Training shall include, but is not limited to, those requirements described in 98.41(a)(1) and all aspects of the State's licensure requirements (658E(c)(2)(K)(i)(I); 98.42(b)(1-2)).

- a) To certify, describe how the Lead Agency ensures that licensing inspectors (or qualified monitors designated by the Lead Agency) are qualified to inspect child care facilities and providers and that those inspectors have received training on health and safety requirements that are appropriate to the age of the children in care and the type of provider setting (98.42(b)(1-2)). **Child Care Health and Safety Inspectors must be, at minimum, the equivalent of an Environmental Health Specialist I, and shall meet professional licensure, certification, or be eligible for licensure, in order to conduct specified child care health and safety inspections. Additionally, the health and safety inspector's professional license, professional certification, or professional training status for licensure or certification must be in a health-related field that is valid in the State of Idaho. (C#: WC089900.I.E.)** The Health Districts added language to their operations manual to clarify that staff must conduct all health and safety inspections with cultural sensitivity to the child care provider, including accommodations for providers for whom English is a second language. Language has been added to the Health District Operations Manual to clarify that inspections must also be appropriate to the age of the children in care and the type of setting where care is being provided. Inspectors must receive training in related health and safety requirements appropriate to provider settings and age of children served. Environmental Health Specialists who conduct inspections of child care facilities in Idaho have completed a course in child development, highlighting the age of the children in care and the type of setting where care is being provided. Compliance with this required is maintained in each inspector's personnel file. (C#: WC089900.I.E.) All Child Care Health and Safety Inspectors receive and review the Idaho Child Care Management Manual. The manual outlines the minimum statewide procedures for conducting inspections of child care facilities receiving public assistance from the Idaho Department of Health and Welfare's Idaho Child Care Program (ICCP) and facilities that have a Basic Day Care License. Use of the manual helps to ensure consistent interpretation and application of the regulations and rules that govern child care in the state. Also, it helps to prevent gaps in services provided. The manual details all relevant statutes, rules, policies, and processes for the completion of Child Care Health and Safety Inspections in Idaho, and includes customer service standards that incorporate timely responses, polite service, and time to educate providers on health and safety standards. Additionally, the manual details all aspects of the State's licensure requirements and all aspects of the State's requirements for provider participation with the Idaho Child Care Program. Each inspector is trained using the manual, has access to the most current version of the manual, which is maintained internally by the Health Districts in collaboration with the Idaho Child Care Program and State Daycare Licensing. (C#: WC089900.VI.A.)
- b) Provide the citation(s) for this policy or procedure.
Idaho Department of Health and Welfare contract with Central District Health Department Contract: "Child Care Health and Safety Inspectors must be, at minimum, the equivalent of an Environmental Health Specialist I, and sahe meet professional licensure, certification, or be eligibile for licensure, if required, in order to conduct specified child care health and safety inspections. Inspectors must receive training in related health and safety requirements appropriate to provider settings and age of children served." (C#: WC089900.I.E.)

5.3.5 The states and territories shall have policies and practices that require the ratio of licensing inspectors to child care providers and facilities in the state/territory to be maintained at a level

sufficient to enable the state/territory to conduct effective inspections of child care providers and facilities on a timely basis in accordance with federal, state, and local laws (658E(c)(2)(K)(i)(III); 98.42(b)(3)).

- a) To certify, describe the state/territory policies and practices regarding the ratio of licensing inspectors to child care providers (i.e. number of inspectors per number of child care providers) and facilities in the state/territory and include how the ratio is sufficient to conduct effective inspections on a timely basis. **DHW has a statewide contract with Central District Health Department, which subcontracts to each subsequent health district to appropriately administer and monitor health and safety inspections throughout Idaho for all Licensed and ICCP child care providers. Per the contractual requirements, "The Contractor shall maintain a sufficient inspector to provider ratio to ensure timeliness of all inspections per contract requirements." The contract explicitly identifies timelines associated to inspections, complaint referral site visits and follow up for which the Health District must comply. To date, standards for timeliness have been met and are in compliance with contract requirements outlined by the State of Idaho, Department of Health and Welfare.**
- b) Provide the policy citation and state/territory ratio of licensing inspectors. **Idaho Department of Health and Welfare contract with Central District Health Department Contract: "The Contractor shall maintain a sufficient inspector to provider ratio to ensure timeliness of all inspections per contract requirements." (C#: WC089900.VI.A.)**

5.3.6 States and territories have the option to exempt relatives (defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles (98.42(c)) from inspection requirements. *Note: This exception only applies if the individual cares only for relative children. Does the state/territory exempt relatives from the inspection requirements listed in 5.3.3?*

- ☐ Yes, relatives are exempt from all inspection requirements. If the state/territory exempts relatives from all inspection requirements, describe how the state ensures the health and safety of children in relative care.
- ☐ Yes, relatives are exempt from some inspection requirements. If the state/territory exempts relatives from the inspection requirements, describe which inspection requirements do not apply to relative providers (including which relatives may be exempt) and how the State ensures the health and safety of children in relative care.
- ☒ No, relatives are not exempt from inspection requirements.

5.4 Criminal Background Checks

The CCDBG Act requires states and territories to have in effect requirements, policies and procedures to conduct criminal background checks for all child care staff members (including prospective staff members) of all child care programs that are 1) licensed, regulated, or registered under state/territory law; or, 2) all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers) (98.43(a)(1)(i)). Background check requirements

apply to any staff member who is employed by a child care provider for compensation, including contract employees and self-employed individuals; whose activities involve the care or supervision of children; or who has unsupervised access to children (98.43(2)). For FCC homes, this requirement includes the caregiver and any other adults residing in the family child care home who are age 18 or older (98.43(2)(ii)(C)). This requirement does not apply to individuals who are related to all children for whom child care services are provided (98.43(2)(B)(ii)).

A criminal background check must include 8 specific components (98.43(2)(b)), which encompass 3 in-state checks, 2 national checks, and 3 inter-state checks:

Components	In-State	National	Inter-State
1. Criminal registry or repository using fingerprints in the current state of residency	x		
2. Sex offender registry or repository check in the current state of residency	x		
3. Child abuse and neglect registry and database check in the current state of residency	x		
4. FBI fingerprint check		x	
5. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR)		x	
6. Criminal registry or repository in any other state where the individual has resided in the past 5 years, with the use of fingerprints being optional			x
7. Sex offender registry or repository in any other state where the individual has resided in the past 5 years			x
8. Child abuse and neglect registry and database in any other state where the individual has resided in the past 5 years			x

In recognition of the significant challenges to implementing the Child Care and Development Fund (CCDF) background check requirements, all States applied for and received extensions through September 30, 2018. The Office of Child Care (OCC)/Administration for Children and Families (ACF)/U. S. Department of Health and Human Services (HHS) is committed to granting additional waivers of up to 2 years, in one year increments (i.e., potentially through September 30, 2020) if significant milestones for background check requirements are met.

In order to receive these time-limited waivers, states and territories will demonstrate that the milestones are met by responding to questions 5.4.1 through 5.4.4 and then apply for the time-limited waiver by completing the questions in Appendix A: Background Check Waiver Request Form. By September 30, 2018, states and territories must have requirements, policies and procedures for four specific background check components, and must be conducting those checks for all new (prospective) child care staff, in accordance with 98.43 and 98.16(o):

- The national FBI fingerprint check; and,
- The three in-state background check provisions for the current state of residency:

- state criminal registry or repository using fingerprints;
- state sex offender registry or repository check; and
- state-based child abuse and neglect registry and database.

All four components are required in order for the milestone to be considered met.

Components	New (Prospective) Staff	Existing Staff
1. Criminal registry or repository using fingerprints in the current state of residency	Milestone/prerequisite for waiver	Possible time limited waiver for current (existing) staff
2. Sex offender registry or repository check in the current state of residency	Milestone/prerequisite for waiver	Possible time limited waiver for current (existing) staff
3. Child abuse and neglect registry and database check in the current state of residency	Milestone/prerequisite for waiver	Possible time limited waiver for current (existing) staff
4. FBI fingerprint check	Milestone/prerequisite for waiver	Possible time limited waiver for current (existing) staff
5. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR)	Possible time limited waiver for: <ul style="list-style-type: none"> • establishing requirements and procedures; and/or • conducting checks on all new (prospective) staff; and/or • conducting checks on current (existing) staff 	
6. Criminal registry or repository in any other state where the individual has resided in the past 5 years, with the use of fingerprints being optional	Possible time limited waiver for: <ul style="list-style-type: none"> • establishing requirements and procedures; and/or • conducting checks on all new (prospective) staff; and/or • conducting checks on current (existing) staff 	
7. Sex offender registry or repository in any other state where the individual has resided in the past 5 years	Possible time limited waiver for: <ul style="list-style-type: none"> • establishing requirements and procedures; and/or • conducting checks on all new (prospective) staff; and/or • Conducting checks on current (existing) staff 	
8. Child abuse and neglect registry and database in any other state where the individual has resided in the past 5 years	Possible time limited waiver for: <ul style="list-style-type: none"> • establishing requirements and procedures; and/or • conducting checks on all new (prospective) staff; and/or • conducting checks on current (existing) staff 	

Use the questions below to describe the status of the requirements, policies, and procedures for background check requirements. These descriptions must provide sufficient information to demonstrate how the milestone prerequisites are being met and the status of the other components that are not part of the milestone. Lead Agencies have the opportunity to submit a waiver request in Appendix A: Background Check Waiver Request Form for components not included in the milestones. Approval of these waiver requests will be subject to verification that

the milestone components have been met as part of the CCDF Plan review and approval process.

In-state Background Check Requirements

5.4.1 In-State Criminal Registry or Repository Checks with Fingerprints Requirements (98.43(b)(3)(i)).

Note: A search of a general public facing judicial website does not satisfy this requirement. This check is required in addition to the national FBI criminal history check (5.4.4 below) to mitigate any gaps that may exist between the two sources.

- a) Milestone #1 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies and procedures for the search of the in-state criminal registry or repository, with the use of fingerprints required in the state where the staff member resides.
 - i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

Licensed Providers:

16.06.02.009. CRIMINAL HISTORY AND BACKGROUND CHECK REQUIREMENTS.

16.06.02.009.01. Compliance with Department Criminal History and Background Check. Criminal history and background checks are required for individuals who are licensed under these rules. Individuals who are required to have a criminal history check must comply with IDAPA 16.05.06, "Criminal History and Background Checks," with the exception of those individuals described in Subsection 009.04 of this rule.

16.06.02.009.02. When License is Granted. The applicant must have a completed criminal history and background check, including clearance, prior to licensure. Any other adult living in the home must complete a criminal history application, must be fingerprinted, and must not have any disqualifying crimes listed in IDAPA 16.05.06, "Criminal History and Background Checks." (4-7-11)

16.06.02.009.03. Individuals Subject to Criminal History Check Requirements. The following individuals must receive a criminal history and background check clearance prior to licensure: (4-7-11)

16.06.02.009.03.f. Daycare Center, Group Daycare Facility, and Family Day Care Home. The criminal history and background check requirements applicable to a daycare center, group daycare facility, and family daycare home are found in Section 309 of these rules and in Sections 39-1105, 39-1113, and 39-1114, Idaho Code.

16.06.02.309. CRIMINAL HISTORY AND BACKGROUND CHECK FOR DAYCARE STANDARDS.

16.06.02.309.01. Criminal History and Background Check for Daycare Centers and Group Daycare Facilities. Each owner, operator, or applicant seeking licensure for a daycare center, group daycare facility, or a family daycare home must submit evidence that is satisfactory to the Department that the following individuals have successfully completed and received a clearance for a Department criminal history and background check under the provisions of Sections 39-1105 and 39-1113, Idaho Code: (4-7-11)

16.06.02.309.01.a. Owners, operators, and staff; (4-7-11)

16.06.02.309.01.b. All other individuals thirteen (13) years of age or older who have unsupervised direct contact with children; or (4-7-11)

16.06.02.309.01.c. All other individuals thirteen (13) years of age or older who are regularly on the premises. (4-7-11)

Idaho Code 39-1105. CRIMINAL HISTORY CHECKS. (1) The department shall obtain from the owner a criminal history check on the owners, operators and employees of a daycare facility who have direct contact with children, and on all other individuals thirteen (13) years of age or older who have unsupervised direct contact with children or are regularly on the premises of a daycare facility.

16.05.06.001.03. Policy. It is the Department's policy to conduct fingerprint-based criminal history and background checks on individuals who have completed a criminal history application. The criminal history applicant is required to disclose any pertinent information regarding crimes or findings that would disqualify the individual from providing care or services to children or vulnerable adults. The Department may obtain information for these criminal history and background checks from the following sources: (7-1-17)

16.05.06.001.03.c. Idaho State Police Bureau of Criminal Identification; (3-26-08)

- ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

ICCP Providers:

IDAPA 16.06.12.009- Criminal History and Background Check Requirements.

16.06.12.009.01. Compliance with Department Criminal History and Background Check. Criminal history and background checks are required for

ICCP providers. Providers who are required to have a criminal history check must comply with IDAPA 16.05.06, "Criminal History and Background Checks." (4-9-09)

16.06.12.009.02. ICCP Provider is Approved. The ICCP provider must have completed a criminal history and background check, and received a clearance, prior to becoming an ICCP provider.

16.06.12.009.04. Applicants, Providers, and Other Individuals Subject to Criminal History Check Requirements. The following applicants, providers, and other individuals listed below must submit evidence to the Department that the following individuals have successfully completed and received a Department criminal history and background check clearance: (3-2-17)

16.06.12.009.04.a. All child care centers group, family, relative, and in-home providers including owners, operators, and staff, who have direct contact with children; (3-2-17)

16.06.12.009.04.b. All individuals thirteen (13) years of age or older who have direct contact with children; and (3-2-17)

16.06.12.009.04.c. All individuals thirteen (13) years of age or older who are regularly on the premises. (3-2-17)

16.05.06.001.03. Policy. It is the Department's policy to conduct fingerprint-based criminal history and background checks on individuals who have completed a criminal history application. The criminal history applicant is required to disclose any pertinent information regarding crimes or findings that would disqualify the individual from providing care or services to children or vulnerable adults. The Department may obtain information for these criminal history and background checks from the following sources: (7-1-17)

16.05.06.001.03.c. Idaho State Police Bureau of Criminal Identification; (3-26-08)

b) Has the search of the in-state criminal registry or repository, with the use of fingerprints, been conducted for all current (existing) child care staff?

- ☒ Yes. Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

This requirement was in effect in Idaho prior to the Reauthorization of CCDBG.

Idaho Code 39-1105. CRIMINAL HISTORY CHECKS. (1) The department shall obtain from the owner a criminal history check on the owners, operators and employees of a daycare facility who have direct contact with children, and on all other

individuals thirteen (13) years of age or older who have unsupervised direct contact with children or are regularly on the premises of a daycare facility. The criminal history check shall include the following for all persons subject to the provisions of this section who are eighteen (18) years of age or older:

- (a) Statewide criminal identification bureau;
- (b) Federal bureau of investigation (FBI) criminal history;
- (c) National crime information center; and
- (d) Statewide child abuse registry.

(2) Criminal history checks on those persons under eighteen (18) years of age shall include a check of the juvenile justice records of adjudications of the magistrate division of the district court, county probation services and department records as authorized by the minor and his parent or guardian.

16.05.06.001.03. Policy. It is the Department's policy to conduct fingerprint-based criminal history and background checks on individuals who have completed a criminal history application. The criminal history applicant is required to disclose any pertinent information regarding crimes or findings that would disqualify the individual from providing care or services to children or vulnerable adults. The Department may obtain information for these criminal history and background checks from the following sources: (7-1-17)

16.05.06.001.03.c. Idaho State Police Bureau of Criminal Identification; (3-26-08)

- ☐ No. (Waiver request allowed. See Appendix A). Describe the status of conducting the search of the state criminal registry or repository, using fingerprints for current (existing) child care staff including:
 - Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs
 - Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers).
 - Key challenges to fully implementing these requirements
 - Strategies used to address these challenges

Describe:

5.4.2 In-State Sex Offender Registry Requirements (98.43(b)(3)(B)(ii)).

Note: This check must be completed in addition to the national NCIC sex offender registry check (5.4.5 below) to mitigate any gaps that may exist between the two sources. Use of fingerprints is optional to conduct this check.

- a) Milestone #2 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies, and procedures for the search of the in-state sex offender registry.

- i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations.

Licensed Providers:

16.06.02.009. CRIMINAL HISTORY AND BACKGROUND CHECK REQUIREMENTS.

16.06.02.009.01. Compliance with Department Criminal History and Background Check. Criminal history and background checks are required for individuals who are licensed under these rules. Individuals who are required to have a criminal history check must comply with IDAPA 16.05.06, “Criminal History and Background Checks,” with the exception of those individuals described in Subsection 009.04 of this rule.

16.06.02.009.02. When License is Granted. The applicant must have a completed criminal history and background check, including clearance, prior to licensure. Any other adult living in the home must complete a criminal history application, must be fingerprinted, and must not have any disqualifying crimes listed in IDAPA 16.05.06, “Criminal History and Background Checks.” (4-7-11)

16.06.02.009.03. Individuals Subject to Criminal History Check Requirements. The following individuals must receive a criminal history and background check clearance prior to licensure: (4-7-11)

16.06.02.009.03.f. Daycare Center, Group Daycare Facility, and Family Day Care Home. The criminal history and background check requirements applicable to a daycare center, group daycare facility, and family daycare home are found in Section 309 of these rules and in Sections 39-1105, 39-1113, and 39-1114, Idaho Code.

16.06.02.309. CRIMINAL HISTORY AND BACKGROUND CHECK FOR DAYCARE STANDARDS.

16.06.02.309.01. Criminal History and Background Check for Daycare Centers and Group Daycare Facilities. Each owner, operator, or applicant seeking licensure for a daycare center, group daycare facility, or a family daycare home must submit evidence that is satisfactory to the Department that the following individuals have successfully completed and received a clearance for a Department criminal history and background check under the provisions of Sections 39-1105 and 39-1113, Idaho Code: (4-7-11)

16.06.02.309.01.a. Owners, operators, and staff; (4-7-11)

16.06.02.309.01.b. All other individuals thirteen (13) years of age or older who have unsupervised direct contact with children; or (4-7-11)

16.06.02.309.01.c. All other individuals thirteen (13) years of age or older who are regularly on the premises. (4-7-11)

Idaho Code 39-1105. CRIMINAL HISTORY CHECKS. (1) The department shall obtain from the owner a criminal history check on the owners, operators and employees of a daycare facility who have direct contact with children, and on all other individuals thirteen (13) years of age or older who have unsupervised direct contact with children or are regularly on the premises of a daycare facility.

16.05.06.001.03. Policy. It is the Department’s policy to conduct fingerprint-based criminal history and background checks on individuals who have completed a criminal history application. The criminal history applicant is required to disclose any pertinent information regarding crimes or findings that would disqualify the individual from providing care or services to children or vulnerable adults. The Department may obtain information for these criminal history and background checks from the following sources: (7-1-17)

16.05.06.001.03.f. Any state or federal Sexual Offender Registry; (7-1-17)

- ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations.

ICCP Providers:

IDAPA 16.06.12.009- Criminal History and Background Check Requirements.

16.06.12.009.01. Compliance with Department Criminal History and Background Check. Criminal history and background checks are required for ICCP providers. Providers who are required to have a criminal history check must comply with IDAPA 16.05.06, “Criminal History and Background Checks.” (4-9-09)

16.06.12.009.02. ICCP Provider is Approved. The ICCP provider must have completed a criminal history and background check, and received a clearance, prior to becoming an ICCP provider.

16.06.12.009.04. Applicants, Providers, and Other Individuals Subject to Criminal History Check Requirements. The following applicants, providers, and other individuals listed below must submit evidence to the Department that the following individuals have successfully completed and received a Department criminal history and background check clearance: (3-2-17)

16.06.12.009.04.a. All child care centers group, family, relative, and in-home providers including owners, operators, and staff, who have direct contact with children; (3-2-17)

16.06.12.009.04.b. All individuals thirteen (13) years of age or older who have direct contact with children; and (3-2-17)

16.06.12.009.04.c. All individuals thirteen (13) years of age or older who are regularly on the premises. (3-2-17)

16.05.06.001.03. Policy. It is the Department's policy to conduct fingerprint-based criminal history and background checks on individuals who have completed a criminal history application. The criminal history applicant is required to disclose any pertinent information regarding crimes or findings that would disqualify the individual from providing care or services to children or vulnerable adults. The Department may obtain information for these criminal history and background checks from the following sources: (7-1-17)

16.05.06.001.03.f. Any state or federal Sexual Offender Registry; (7-1-17)

b) Has the search of the in-state sex offender registry been conducted for all current (existing) child care staff?

- ☒ Yes. Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

This requirement was in effect in Idaho prior to the Reauthorization of CCDBG.

Idaho Code 39-1105. CRIMINAL HISTORY CHECKS. (1) The department shall obtain from the owner a criminal history check on the owners, operators and employees of a daycare facility who have direct contact with children, and on all other individuals thirteen (13) years of age or older who have unsupervised direct contact with children or are regularly on the premises of a daycare facility. The criminal history check shall include the following for all persons subject to the provisions of this section who are eighteen (18) years of age or older:

- (a) Statewide criminal identification bureau;
- (b) Federal bureau of investigation (FBI) criminal history;
- (c) National crime information center; and
- (d) Statewide child abuse registry.

(2) Criminal history checks on those persons under eighteen (18) years of age shall include a check of the juvenile justice records of adjudications of the magistrate division of the district court, county probation services and department records as authorized by the minor and his parent or guardian.

16.05.06.001.03. Policy. It is the Department's policy to conduct fingerprint-based criminal history and background checks on individuals who have completed a

criminal history application. The criminal history applicant is required to disclose any pertinent information regarding crimes or findings that would disqualify the individual from providing care or services to children or vulnerable adults. The Department may obtain information for these criminal history and background checks from the following sources: (7-1-17)

16.05.06.001.03.c. Idaho State Police Bureau of Criminal Identification; (3-26-08)

16.05.06.001.03.f. Any state or federal Sexual Offender Registry; (7-1-17)

- ☐ No. (Waiver request allowed. See Appendix A). Describe the status of conducting the search of the state sex offender registry for current (existing) child care staff including:
- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated, or registered programs
 - Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers)
 - Key challenges to fully implementing this requirement
 - Strategies used to address these challenges

Describe:

5.4.3 In-State Child Abuse and Neglect Registry Requirements (98.43(b)(3)(B)(iii)).

Note: This is a name-based search.

- a) Milestone #3 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies, and procedures for the search of the in-state child abuse and neglect registry.
- i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations.
- Licensed Providers:**
- 16.06.02.009. CRIMINAL HISTORY AND BACKGROUND CHECK REQUIREMENTS.**
- 16.06.02.009.01. Compliance with Department Criminal History and Background Check.** Criminal history and background checks are required for individuals who are licensed under these rules. Individuals who are required to have a criminal history check must comply with IDAPA 16.05.06, "Criminal History and Background Checks," with the exception of those individuals described in Subsection 009.04 of this rule.
- 16.06.02.009.02. When License is Granted.** The applicant must have a completed criminal history and background check, including clearance, prior to licensure. Any other adult living in the home must complete a criminal

history application, must be fingerprinted, and must not have any disqualifying crimes listed in IDAPA 16.05.06, “Criminal History and Background Checks.” (4-7-11)

16.06.02.009.03. Individuals Subject to Criminal History Check

Requirements. The following individuals must receive a criminal history and background check clearance prior to licensure: (4-7-11)

16.06.02.009.03.f. Daycare Center, Group Daycare Facility, and Family Day Care Home. The criminal history and background check requirements applicable to a daycare center, group daycare facility, and family daycare home are found in Section 309 of these rules and in Sections 39-1105, 39-1113, and 39-1114, Idaho Code.

16.06.02.309. CRIMINAL HISTORY AND BACKGROUND CHECK FOR DAYCARE STANDARDS.

16.06.02.309.01. Criminal History and Background Check for Daycare Centers and Group Daycare Facilities. Each owner, operator, or applicant seeking licensure for a daycare center, group daycare facility, or a family daycare home must submit evidence that is satisfactory to the Department that the following individuals have successfully completed and received a clearance for a Department criminal history and background check under the provisions of Sections 39-1105 and 39-1113, Idaho Code: (4-7-11)

16.06.02.309.01.a. Owners, operators, and staff; (4-7-11)

16.06.02.309.01.b. All other individuals thirteen (13) years of age or older who have unsupervised direct contact with children; or (4-7-11)

16.06.02.309.01.c. All other individuals thirteen (13) years of age or older who are regularly on the premises. (4-7-11)

Idaho Code 39-1105. CRIMINAL HISTORY CHECKS. (1) The department shall obtain from the owner a criminal history check on the owners, operators and employees of a daycare facility who have direct contact with children, and on all other individuals thirteen (13) years of age or older who have unsupervised direct contact with children or are regularly on the premises of a daycare facility.

16.05.06.001.03. Policy. It is the Department’s policy to conduct fingerprint-based criminal history and background checks on individuals who have completed a criminal history application. The criminal history applicant is required to disclose any pertinent information regarding crimes or findings that would disqualify the individual from providing care or services to children or vulnerable adults. The Department may obtain information for these criminal history and background checks from the following sources: (7-1-17)

16.05.06.001.03.d. Any state or federal Child Protection Registry; (7-1-17)

- ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations.

ICCP Providers:

IDAPA 16.06.12.009- Criminal History and Background Check Requirements.

16.06.12.009.01. Compliance with Department Criminal History and Background Check. Criminal history and background checks are required for ICCP providers. Providers who are required to have a criminal history check must comply with IDAPA 16.05.06, “Criminal History and Background Checks.” (4-9-09)

16.06.12.009.02. ICCP Provider is Approved. The ICCP provider must have completed a criminal history and background check, and received a clearance, prior to becoming an ICCP provider.

16.06.12.009.04. Applicants, Providers, and Other Individuals Subject to Criminal History Check Requirements. The following applicants, providers, and other individuals listed below must submit evidence to the Department that the following individuals have successfully completed and received a Department criminal history and background check clearance: (3-2-17)

16.06.12.009.04.a. All child care centers group, family, relative, and in-home providers including owners, operators, and staff, who have direct contact with children; (3-2-17)

16.06.12.009.04.b. All individuals thirteen (13) years of age or older who have direct contact with children; and (3-2-17)

16.06.12.009.04.c. All individuals thirteen (13) years of age or older who are regularly on the premises. (3-2-17)

16.05.06.001.03. Policy. It is the Department’s policy to conduct fingerprint-based criminal history and background checks on individuals who have completed a criminal history application. The criminal history applicant is required to disclose any pertinent information regarding crimes or findings that would disqualify the individual from providing care or services to children or vulnerable adults. The Department may obtain information for these criminal history and background checks from the following sources: (7-1-17)

16.05.06.001.03.d. Any state or federal Child Protection Registry; (7-1-17)

- b) Has the search of the in-state child abuse and neglect registry been conducted for all current (existing) child care staff?
- ☒ Yes. Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

This requirement was in effect in Idaho prior to the Reauthorization of CCDBG.

Idaho Code 39-1105. CRIMINAL HISTORY CHECKS. (1) The department shall obtain from the owner a criminal history check on the owners, operators and employees of a daycare facility who have direct contact with children, and on all other individuals thirteen (13) years of age or older who have unsupervised direct contact with children or are regularly on the premises of a daycare facility. The criminal history check shall include the following for all persons subject to the provisions of this section who are eighteen (18) years of age or older:

- (a) Statewide criminal identification bureau;**
- (b) Federal bureau of investigation (FBI) criminal history;**
- (c) National crime information center; and**
- (d) Statewide child abuse registry.**

(2) Criminal history checks on those persons under eighteen (18) years of age shall include a check of the juvenile justice records of adjudications of the magistrate division of the district court, county probation services and department records as authorized by the minor and his parent or guardian.

16.05.06.001.03. Policy. It is the Department's policy to conduct fingerprint-based criminal history and background checks on individuals who have completed a criminal history application. The criminal history applicant is required to disclose any pertinent information regarding crimes or findings that would disqualify the individual from providing care or services to children or vulnerable adults. The Department may obtain information for these criminal history and background checks from the following sources: (7-1-17)

16.05.06.001.03.d. Any state or federal Child Protection Registry; (7-1-17)

- ☐ No. (Waiver request allowed. See Appendix A.) Describe the status of conducting the search of the state child abuse and neglect registry for current (existing) child care staff including:
- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated, or registered programs
 - Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers)
 - Key challenges to fully implementing this requirement

- Strategies used to address these challenges

Describe: [REDACTED]

National Background Check Requirements

5.4.4 National FBI Criminal Fingerprint Search Requirements (98.43(b)(1)).

Note: The in-state (5.4.1 above) and the inter-state (5.4.6 below) criminal history check must be completed in addition to the FBI fingerprint check because there could be state crimes that do not appear in the national repository. Also note that an FBI fingerprint check satisfies the requirement to perform an interstate check of another state's criminal history records repository if the responding state (where the child care staff member has resided within the past five years) participates in the National Fingerprint File program (CCDF-ACF-PIQ-2017-01).

- a) Milestone #4 Prerequisite for New (Prospective) Child Care Staff. Describe the requirements, policies, and procedures for the search of the national FBI fingerprint check.
 - i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations.

Licensed Providers:

16.06.02.009. CRIMINAL HISTORY AND BACKGROUND CHECK REQUIREMENTS.

16.06.02.009.01. Compliance with Department Criminal History and Background Check. Criminal history and background checks are required for individuals who are licensed under these rules. Individuals who are required to have a criminal history check must comply with IDAPA 16.05.06, "Criminal History and Background Checks," with the exception of those individuals described in Subsection 009.04 of this rule.

16.06.02.009.02. When License is Granted. The applicant must have a completed criminal history and background check, including clearance, prior to licensure. Any other adult living in the home must complete a criminal history application, must be fingerprinted, and must not have any disqualifying crimes listed in IDAPA 16.05.06, "Criminal History and Background Checks." (4-7-11)

16.06.02.009.03. Individuals Subject to Criminal History Check Requirements. The following individuals must receive a criminal history and background check clearance prior to licensure: (4-7-11)

16.06.02.009.03.f. Daycare Center, Group Daycare Facility, and Family Day Care Home. The criminal history and background check requirements applicable to a daycare center, group daycare facility, and family daycare home are found in Section 309 of these rules and in Sections 39-1105, 39-1113, and 39-1114, Idaho Code.

16.06.02.309. CRIMINAL HISTORY AND BACKGROUND CHECK FOR DAYCARE STANDARDS.

16.06.02.309.01. Criminal History and Background Check for Daycare Centers and Group Daycare Facilities. Each owner, operator, or applicant seeking licensure for a daycare center, group daycare facility, or a family daycare home must submit evidence that is satisfactory to the Department that the following individuals have successfully completed and received a clearance for a Department criminal history and background check under the provisions of Sections 39-1105 and 39-1113, Idaho Code: (4-7-11)

16.06.02.309.01.a. Owners, operators, and staff; (4-7-11)

16.06.02.309.01.b. All other individuals thirteen (13) years of age or older who have unsupervised direct contact with children; or (4-7-11)

16.06.02.309.01.c. All other individuals thirteen (13) years of age or older who are regularly on the premises. (4-7-11)

Idaho Code 39-1105. CRIMINAL HISTORY CHECKS. (1) The department shall obtain from the owner a criminal history check on the owners, operators and employees of a daycare facility who have direct contact with children, and on all other individuals thirteen (13) years of age or older who have unsupervised direct contact with children or are regularly on the premises of a daycare facility.

16.05.06.001.03. Policy. It is the Department's policy to conduct fingerprint-based criminal history and background checks on individuals who have completed a criminal history application. The criminal history applicant is required to disclose any pertinent information regarding crimes or findings that would disqualify the individual from providing care or services to children or vulnerable adults. The Department may obtain information for these criminal history and background checks from the following sources: (7-1-17)

16.05.06.001.03.a. Federal Bureau of Investigation; (3-26-08)

- ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations.

ICCP Providers:

IDAPA 16.06.12.009- Criminal History and Background Check Requirements.

16.06.12.009.01. Compliance with Department Criminal History and Background Check. Criminal history and background checks are required for ICCP providers. Providers who are required to have a criminal history check

must comply with IDAPA 16.05.06, "Criminal History and Background Checks." (4-9-09)

16.06.12.009.02. ICCP Provider is Approved. The ICCP provider must have completed a criminal history and background check, and received a clearance, prior to becoming an ICCP provider.

16.06.12.009.04. Applicants, Providers, and Other Individuals Subject to Criminal History Check Requirements. The following applicants, providers, and other individuals listed below must submit evidence to the Department that the following individuals have successfully completed and received a Department criminal history and background check clearance: (3-2-17)

16.06.12.009.04.a. All child care centers group, family, relative, and in-home providers including owners, operators, and staff, who have direct contact with children; (3-2-17)

16.06.12.009.04.b. All individuals thirteen (13) years of age or older who have direct contact with children; and (3-2-17)

16.06.12.009.04.c. All individuals thirteen (13) years of age or older who are regularly on the premises. (3-2-17)

16.05.06.001.03. Policy. It is the Department's policy to conduct fingerprint-based criminal history and background checks on individuals who have completed a criminal history application. The criminal history applicant is required to disclose any pertinent information regarding crimes or findings that would disqualify the individual from providing care or services to children or vulnerable adults. The Department may obtain information for these criminal history and background checks from the following sources: (7-1-17)

16.05.06.001.03.a. Federal Bureau of Investigation; (3-26-08)

b) For all current (existing) child care staff, has the FBI criminal fingerprint check been conducted?

☒ Yes. Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

This requirement was in effect in Idaho prior to the Reauthorization of CCDBG.

Idaho Code 39-1105. CRIMINAL HISTORY CHECKS. (1) The department shall obtain from the owner a criminal history check on the owners, operators and employees of a daycare facility who have direct contact with children, and on all other individuals thirteen (13) years of age or older who have unsupervised direct contact with children or are regularly on the premises of a daycare facility. The criminal history check shall include the following for all persons subject to the provisions of this section who are eighteen (18) years of age or older:

(a) Statewide criminal identification bureau;

- (b) Federal bureau of investigation (FBI) criminal history;
- (c) National crime information center; and
- (d) Statewide child abuse registry.

(2) Criminal history checks on those persons under eighteen (18) years of age shall include a check of the juvenile justice records of adjudications of the magistrate division of the district court, county probation services and department records as authorized by the minor and his parent or guardian.

16.05.06.001.03. Policy. It is the Department's policy to conduct fingerprint-based criminal history and background checks on individuals who have completed a criminal history application. The criminal history applicant is required to disclose any pertinent information regarding crimes or findings that would disqualify the individual from providing care or services to children or vulnerable adults. The Department may obtain information for these criminal history and background checks from the following sources: (7-1-17)

16.05.06.001.03.a. Federal Bureau of Investigation; (3-26-08)

- ☐ No (Waiver request allowed. See Appendix A.) Describe the status of conducting the FBI fingerprint check for current (existing) child care staff including:
 - Efforts to date to complete the requirement for all existing child care staff in licensed, regulated, or registered programs
 - Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF
 - Key challenges to fully implementing this requirement
 - Strategies used to address these challenges

Describe:

5.4.5 National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) Search Requirements (98.43(b)(2)).

Note: This is a name-based search. Searching general public facing sex offender registries does not satisfy this requirement. This national check must be required in addition to the in-state (5.4.2 above) or inter-state (5.4.7 below) sex offender registry check requirements. This check must be performed by law enforcement.

- a) Has the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check been put in place for all new (prospective) child care staff?

- ☒ Yes. If yes,
 - i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations.

Licensed Providers:

16.06.02.009. CRIMINAL HISTORY AND BACKGROUND CHECK REQUIREMENTS.

16.06.02.009.01. Compliance with Department Criminal History and Background Check. Criminal history and background checks are required for individuals who are licensed under these rules. Individuals who are required to have a criminal history check must comply with IDAPA 16.05.06, "Criminal History and Background Checks," with the exception of those individuals described in Subsection 009.04 of this rule.

16.06.02.009.02. When License is Granted. The applicant must have a completed criminal history and background check, including clearance, prior to licensure. Any other adult living in the home must complete a criminal history application, must be fingerprinted, and must not have any disqualifying crimes listed in IDAPA 16.05.06, "Criminal History and Background Checks." (4-7-11)

16.06.02.009.03. Individuals Subject to Criminal History Check Requirements. The following individuals must receive a criminal history and background check clearance prior to licensure: (4-7-11)

16.06.02.009.03.f. Daycare Center, Group Daycare Facility, and Family Day Care Home. The criminal history and background check requirements applicable to a daycare center, group daycare facility, and family daycare home are found in Section 309 of these rules and in Sections 39-1105, 39-1113, and 39-1114, Idaho Code.

16.06.02.309. CRIMINAL HISTORY AND BACKGROUND CHECK FOR DAYCARE STANDARDS.

16.06.02.309.01. Criminal History and Background Check for Daycare Centers and Group Daycare Facilities. Each owner, operator, or applicant seeking licensure for a daycare center, group daycare facility, or a family daycare home must submit evidence that is satisfactory to the Department that the following individuals have successfully completed and received a clearance for a Department criminal history and background check under the provisions of Sections 39-1105 and 39-1113, Idaho Code: (4-7-11)

16.06.02.309.01.a. Owners, operators, and staff; (4-7-11)

16.06.02.309.01.b. All other individuals thirteen (13) years of age or older who have unsupervised direct contact with children; or (4-7-11)

16.06.02.309.01.c. All other individuals thirteen (13) years of age or older who are regularly on the premises. (4-7-11)

Idaho Code 39-1105. CRIMINAL HISTORY CHECKS. (1) The department shall obtain from the owner a criminal history check on the owners, operators and employees of a daycare facility who have direct contact with children, and on all other individuals thirteen (13) years of age or older who have

unsupervised direct contact with children or are regularly on the premises of a daycare facility.

16.05.06.001.03. Policy. It is the Department's policy to conduct fingerprint-based criminal history and background checks on individuals who have completed a criminal history application. The criminal history applicant is required to disclose any pertinent information regarding crimes or findings that would disqualify the individual from providing care or services to children or vulnerable adults. The Department may obtain information for these criminal history and background checks from the following sources: (7-1-17)

16.05.06.001.03.b. National Crime Information Center; (3-26-08)

16.05.06.001.03.f. Any state or federal Sexual Offender Registry; (7-1-17)

- ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations.

ICCP Providers:

IDAPA 16.06.12.009- Criminal History and Background Check Requirements.

16.06.12.009.01. Compliance with Department Criminal History and Background Check. Criminal history and background checks are required for ICCP providers. Providers who are required to have a criminal history check must comply with IDAPA 16.05.06, "Criminal History and Background Checks." (4-9-09)

16.06.12.009.02. ICCP Provider is Approved. The ICCP provider must have completed a criminal history and background check, and received a clearance, prior to becoming an ICCP provider.

16.06.12.009.04. Applicants, Providers, and Other Individuals Subject to Criminal History Check Requirements. The following applicants, providers, and other individuals listed below must submit evidence to the Department that the following individuals have successfully completed and received a Department criminal history and background check clearance: (3-2-17)

16.06.12.009.04.a. All child care centers group, family, relative, and in-home providers including owners, operators, and staff, who have direct contact with children; (3-2-17)

16.06.12.009.04.b. All individuals thirteen (13) years of age or older who have direct contact with children; and (3-2-17)

16.06.12.009.04.c. All individuals thirteen (13) years of age or older who are regularly on the premises. (3-2-17)

16.05.06.001.03. Policy. It is the Department's policy to conduct fingerprint-based criminal history and background checks on individuals who have completed a criminal history application. The criminal history applicant is required to disclose any pertinent information regarding crimes or findings that would disqualify the individual from providing care or services to children or vulnerable adults. The Department may obtain information for these criminal history and background checks from the following sources: (7-1-17)

16.05.06.001.03.b. National Crime Information Center; (3-26-08)

16.05.06.001.03.f. Any state or federal Sexual Offender Registry; (7-1-17)

☐ **No** (Waiver request allowed. See Appendix A). Describe the status of conducting the the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) for new (prospective) child care staff including:

- Efforts to date to complete the requirement for all new child care staff in licensed, regulated, or registered programs
- Efforts to date to complete the requirement for all new child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers)
- Key challenges to fully implementing this requirement
- Strategies used to address these challenges

Describe:

b) Has the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check been put in place for all current (existing) child care staff?

☒ **Yes.** Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

This requirement was in effect in Idaho prior to the Reauthorization of CCDBG.

Idaho Code 39-1105. CRIMINAL HISTORY CHECKS. (1) The department shall obtain from the owner a criminal history check on the owners, operators and employees of a daycare facility who have direct contact with children, and on all other individuals thirteen (13) years of age or older who have unsupervised direct contact with children or are regularly on the premises of a daycare facility. The criminal history check shall include the following for all persons subject to the provisions of this section who are eighteen (18) years of age or older:

- (a) Statewide criminal identification bureau;
- (b) Federal bureau of investigation (FBI) criminal history;
- (c) National crime information center; and
- (d) Statewide child abuse registry.

(2) Criminal history checks on those persons under eighteen (18) years of age shall include a check of the juvenile justice records of adjudications of the magistrate

division of the district court, county probation services and department records as authorized by the minor and his parent or guardian.

16.05.06.001.03. Policy. It is the Department's policy to conduct fingerprint-based criminal history and background checks on individuals who have completed a criminal history application. The criminal history applicant is required to disclose any pertinent information regarding crimes or findings that would disqualify the individual from providing care or services to children or vulnerable adults. The Department may obtain information for these criminal history and background checks from the following sources: (7-1-17)

16.05.06.001.03.b. National Crime Information Center; (3-26-08)

16.05.06.001.03.f. Any state or federal Sexual Offender Registry; (7-1-17)

- ☐ No (Waiver request allowed. See Appendix A.) Describe the status of conducting the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check for current (existing) child care staff including:

- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated, or registered programs
- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers).
- Key challenges to fully implementing this requirement
- Strategies used to address these challenges

Describe:

Inter-state Background Check Requirements

Checking a potential employee's history in any state other than that in which the provider's services are provided qualifies as an inter-state check, per the definition of required criminal background checks in 98.43(b)(3). For example, an inter-state check would include situations when child care staff members work in one state and live in another state. The statute and regulations require background checks in the state where the staff member resides and each state where the staff member resided during the previous 5 years. Background checks in the state where the staff member is employed may be advisable, but are not strictly required.

- 5.4.6 Interstate Criminal Registry or Repository Check Requirement (including in any other state where the individual has resided in the past 5 years). (98.43 (b)(3)(i)).**

Note: It is optional to use a fingerprint to conduct this check. Searching a general public facing judicial website does not satisfy this requirement. This check must be completed in addition to the national FBI history check (5.4.4 above) to mitigate any gaps that may exist between the two sources (unless the responding state participates in the National Fingerprint File program).

a) Has the interstate criminal registry or repository check been put in place for all new (prospective) child care staff?

☒ Yes. If yes,

- i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o).

Licensed Providers:

16.06.02.009. CRIMINAL HISTORY AND BACKGROUND CHECK REQUIREMENTS.

16.06.02.009.01. Compliance with Department Criminal History and Background Check. Criminal history and background checks are required for individuals who are licensed under these rules. Individuals who are required to have a criminal history check must comply with IDAPA 16.05.06, "Criminal History and Background Checks," with the exception of those individuals described in Subsection 009.04 of this rule.

16.06.02.009.02. When License is Granted. The applicant must have a completed criminal history and background check, including clearance, prior to licensure. Any other adult living in the home must complete a criminal history application, must be fingerprinted, and must not have any disqualifying crimes listed in IDAPA 16.05.06, "Criminal History and Background Checks." (4-7-11)

16.06.02.009.03. Individuals Subject to Criminal History Check Requirements. The following individuals must receive a criminal history and background check clearance prior to licensure: (4-7-11)

16.06.02.009.03.f. Daycare Center, Group Daycare Facility, and Family Day Care Home. The criminal history and background check requirements applicable to a daycare center, group daycare facility, and family daycare home are found in Section 309 of these rules and in Sections 39-1105, 39-1113, and 39-1114, Idaho Code.

16.06.02.309. CRIMINAL HISTORY AND BACKGROUND CHECK FOR DAYCARE STANDARDS.

16.06.02.309.01. Criminal History and Background Check for Daycare Centers and Group Daycare Facilities. Each owner, operator, or applicant seeking licensure for a daycare center, group daycare facility, or a family daycare home must submit evidence that is satisfactory to the Department that the following individuals have successfully completed and received a clearance for a Department criminal history and background check under the provisions of Sections 39-1105 and 39-1113, Idaho Code: (4-7-11)

16.06.02.309.01.a. Owners, operators, and staff; (4-7-11)

16.06.02.309.01.b. All other individuals thirteen (13) years of age or older who have unsupervised direct contact with children; or (4-7-11)

16.06.02.309.01.c. All other individuals thirteen (13) years of age or older who are regularly on the premises. (4-7-11)

Idaho Code 39-1105. CRIMINAL HISTORY CHECKS. (1) The department shall obtain from the owner a criminal history check on the owners, operators and employees of a daycare facility who have direct contact with children, and on all other individuals thirteen (13) years of age or older who have unsupervised direct contact with children or are regularly on the premises of a daycare facility.

16.05.06.001.03. Policy. It is the Department's policy to conduct fingerprint-based criminal history and background checks on individuals who have completed a criminal history application. The criminal history applicant is required to disclose any pertinent information regarding crimes or findings that would disqualify the individual from providing care or services to children or vulnerable adults. The Department may obtain information for these criminal history and background checks from the following sources: (7-1-17)

16.05.06.001.03.j. Other states and jurisdictions records and findings. (7-1-17)

- ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o).

ICCP Providers:

IDAPA 16.06.12.009- Criminal History and Background Check Requirements.

16.06.12.009.01. Compliance with Department Criminal History and Background Check. Criminal history and background checks are required for ICCP providers. Providers who are required to have a criminal history check must comply with IDAPA 16.05.06, "Criminal History and Background Checks." (4-9-09)

16.06.12.009.02. ICCP Provider is Approved. The ICCP provider must have completed a criminal history and background check, and received a clearance, prior to becoming an ICCP provider.

16.06.12.009.04. Applicants, Providers, and Other Individuals Subject to Criminal History Check Requirements. The following applicants, providers, and other individuals listed below must submit evidence to the Department that the following individuals have successfully completed and received a Department criminal history and background check clearance: (3-2-17)

16.06.12.009.04.a. All child care centers group, family, relative, and in-home providers including owners, operators, and staff, who have direct contact with children; (3-2-17)

16.06.12.009.04.b. All individuals thirteen (13) years of age or older who have direct contact with children; and (3-2-17)

16.06.12.009.04.c. All individuals thirteen (13) years of age or older who are regularly on the premises. (3-2-17)

16.05.06.001.03. Policy. It is the Department's policy to conduct fingerprint-based criminal history and background checks on individuals who have completed a criminal history application. The criminal history applicant is required to disclose any pertinent information regarding crimes or findings that would disqualify the individual from providing care or services to children or vulnerable adults. The Department may obtain information for these criminal history and background checks from the following sources: (7-1-17)

16.05.06.001.03.j. Other states and jurisdictions records and findings. (7-1-17)

- ☐ No. (Waiver request allowed. See Appendix A.). Describe the status of conducting the the interstate criminal registry or repository check for new (prospective) child care staff including:
- Efforts to date to complete the requirement for all new child care staff in licensed, regulated, or registered programs
 - Efforts to date to complete the requirement for all new child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers)
 - Key challenges to fully implementing this requirement
 - Strategies used to address these challenges

Describe:

- b) Has the interstate criminal registry or repository check been put in place for all current (existing) child care staff?

- ☒ Yes. Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

Idaho Code 39-1105. CRIMINAL HISTORY CHECKS. (1) The department shall obtain from the owner a criminal history check on the owners, operators and employees of a daycare facility who have direct contact with children, and on all other individuals thirteen (13) years of age or older who have unsupervised direct contact with children or are regularly on the premises of a daycare facility. The

criminal history check shall include the following for all persons subject to the provisions of this section who are eighteen (18) years of age or older:

- (a) Statewide criminal identification bureau;
- (b) Federal bureau of investigation (FBI) criminal history;
- (c) National crime information center; and
- (d) Statewide child abuse registry.

(2) Criminal history checks on those persons under eighteen (18) years of age shall include a check of the juvenile justice records of adjudications of the magistrate division of the district court, county probation services and department records as authorized by the minor and his parent or guardian.

16.05.06.001.03. Policy. It is the Department's policy to conduct fingerprint-based criminal history and background checks on individuals who have completed a criminal history application. The criminal history applicant is required to disclose any pertinent information regarding crimes or findings that would disqualify the individual from providing care or services to children or vulnerable adults. The Department may obtain information for these criminal history and background checks from the following sources: (7-1-17)

16.05.06.001.03.j. Other states and jurisdictions records and findings. (7-1-17)

- ☐ No. (Waiver request allowed. See Appendix A.) Describe the status of conducting the interstate criminal registry or repository check for current (existing) child care staff including:
- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated, or registered programs
 - Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers)
 - Key challenges to fully implementing this requirement
 - Strategies used to address these challenges

Describe:

5.4.7 Interstate Sex Offender Registry or Repository Check Requirements (including in any state where the individual has resided in the past 5 years). (98.43 (b)(3)(ii)).

Note: It is optional to use a fingerprint to conduct this check. This check must be completed in addition to the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) (5.4.5 above) to mitigate any gaps that may exist between the two sources.

- a) Has the interstate sex offender registry or repository check been put in place for all new (prospective) child care staff?

☒ Yes. If yes,

- i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o).

Licensed Providers:

16.06.02.009. CRIMINAL HISTORY AND BACKGROUND CHECK REQUIREMENTS.

16.06.02.009.01. Compliance with Department Criminal History and Background Check. Criminal history and background checks are required for individuals who are licensed under these rules. Individuals who are required to have a criminal history check must comply with IDAPA 16.05.06, "Criminal History and Background Checks," with the exception of those individuals described in Subsection 009.04 of this rule.

16.06.02.009.02. When License is Granted. The applicant must have a completed criminal history and background check, including clearance, prior to licensure. Any other adult living in the home must complete a criminal history application, must be fingerprinted, and must not have any disqualifying crimes listed in IDAPA 16.05.06, "Criminal History and Background Checks." (4-7-11)

16.06.02.009.03. Individuals Subject to Criminal History Check Requirements. The following individuals must receive a criminal history and background check clearance prior to licensure: (4-7-11)

16.06.02.009.03.f. Daycare Center, Group Daycare Facility, and Family Day Care Home. The criminal history and background check requirements applicable to a daycare center, group daycare facility, and family daycare home are found in Section 309 of these rules and in Sections 39-1105, 39-1113, and 39-1114, Idaho Code.

16.06.02.309. CRIMINAL HISTORY AND BACKGROUND CHECK FOR DAYCARE STANDARDS.

16.06.02.309.01. Criminal History and Background Check for Daycare Centers and Group Daycare Facilities. Each owner, operator, or applicant seeking licensure for a daycare center, group daycare facility, or a family daycare home must submit evidence that is satisfactory to the Department that the following individuals have successfully completed and received a clearance for a Department criminal history and background check under the provisions of Sections 39-1105 and 39-1113, Idaho Code: (4-7-11)

16.06.02.309.01.a. Owners, operators, and staff; (4-7-11)

16.06.02.309.01.b. All other individuals thirteen (13) years of age or older who have unsupervised direct contact with children; or (4-7-11)

16.06.02.309.01.c. All other individuals thirteen (13) years of age or older who are regularly on the premises. (4-7-11)

Idaho Code 39-1105. CRIMINAL HISTORY CHECKS. (1) The department shall obtain from the owner a criminal history check on the owners, operators and employees of a daycare facility who have direct contact with children, and on all other individuals thirteen (13) years of age or older who have unsupervised direct contact with children or are regularly on the premises of a daycare facility.

16.05.06.001.03. Policy. It is the Department's policy to conduct fingerprint-based criminal history and background checks on individuals who have completed a criminal history application. The criminal history applicant is required to disclose any pertinent information regarding crimes or findings that would disqualify the individual from providing care or services to children or vulnerable adults. The Department may obtain information for these criminal history and background checks from the following sources: (7-1-17)

16.05.06.001.03.f. Any state or federal Sexual Offender Registry; (7-1-17)

- ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o).

ICCP Providers:

IDAPA 16.06.12.009- Criminal History and Background Check Requirements.

16.06.12.009.01. Compliance with Department Criminal History and Background Check. Criminal history and background checks are required for ICCP providers. Providers who are required to have a criminal history check must comply with IDAPA 16.05.06, "Criminal History and Background Checks." (4-9-09)

16.06.12.009.02. ICCP Provider is Approved. The ICCP provider must have completed a criminal history and background check, and received a clearance, prior to becoming an ICCP provider.

16.06.12.009.04. Applicants, Providers, and Other Individuals Subject to Criminal History Check Requirements. The following applicants, providers, and other individuals listed below must submit evidence to the Department that the following individuals have successfully completed and received a Department criminal history and background check clearance: (3-2-17)

16.06.12.009.04.a. All child care centers group, family, relative, and in-home providers including owners, operators, and staff, who have direct contact with children; (3-2-17)

16.06.12.009.04.b. All individuals thirteen (13) years of age or older who have direct contact with children; and (3-2-17)

16.06.12.009.04.c. All individuals thirteen (13) years of age or older who are regularly on the premises. (3-2-17)

16.05.06.001.03. Policy. It is the Department's policy to conduct fingerprint-based criminal history and background checks on individuals who have completed a criminal history application. The criminal history applicant is required to disclose any pertinent information regarding crimes or findings that would disqualify the individual from providing care or services to children or vulnerable adults. The Department may obtain information for these criminal history and background checks from the following sources: (7-1-17)

16.05.06.001.03.f. Any state or federal Sexual Offender Registry; (7-1-17)

- ☐ No. (Waiver request allowed. See Appendix A.) Describe the status of conducting the interstate sex offender registry or repository check for new (prospective) child care staff including:
- Efforts to date to complete the requirement for all new child care staff in licensed, regulated, or registered programs
 - Efforts to date to complete the requirement for all new child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers)
 - Key challenges to fully implementing this requirement
 - Strategies used to address these challenges
- Describe:

b) Has the interstate sex offender registry or repository check been put in place for all current (existing) child care staff?

- ☒ Yes. Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

Idaho Code 39-1105. CRIMINAL HISTORY CHECKS. (1) The department shall obtain from the owner a criminal history check on the owners, operators and employees of a daycare facility who have direct contact with children, and on all other individuals thirteen (13) years of age or older who have unsupervised direct contact with children or are regularly on the premises of a daycare facility. The criminal history check shall include the following for all persons subject to the provisions of this section who are eighteen (18) years of age or older:

- (a) Statewide criminal identification bureau;
- (b) Federal bureau of investigation (FBI) criminal history;
- (c) National crime information center; and
- (d) Statewide child abuse registry.

(2) Criminal history checks on those persons under eighteen (18) years of age shall include a check of the juvenile justice records of adjudications of the magistrate

division of the district court, county probation services and department records as authorized by the minor and his parent or guardian.

16.05.06.001.03. Policy. It is the Department's policy to conduct fingerprint-based criminal history and background checks on individuals who have completed a criminal history application. The criminal history applicant is required to disclose any pertinent information regarding crimes or findings that would disqualify the individual from providing care or services to children or vulnerable adults. The Department may obtain information for these criminal history and background checks from the following sources: (7-1-17)

16.05.06.001.03.f. Any state or federal Sexual Offender Registry; (7-1-17)

- ☐ No. (Waiver request allowed. See Appendix A.) Describe the status of conducting the interstate sex offender registry or repository check for current (existing) child care staff including:
- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated, or registered programs
 - Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers)
 - Key challenges to fully implementing this requirement
 - Strategies used to address these challenges
- Describe:

5.4.8 Interstate Child Abuse and Neglect Check Registry Requirements (98.43 (b)(3)(iii)).

Note: This is a name-based search.

- a) Has the interstate child abuse and neglect check been put in place for all new (prospective) child care staff?

- ☐ Yes. If yes,
- i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o).
 - ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o).
- ☒ No. (Waiver request allowed. See Appendix A.) Describe the status of conducting the interstate child abuse and neglect check for new (prospective) child care staff including:
- Efforts to date to complete the requirement for all new child care staff in licensed, regulated, or registered programs

- Efforts to date to complete the requirement for all new child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers)
- Key challenges to fully implementing this requirement
- Strategies used to address these challenges

Describe:

While Idaho has the statute, administrative code, and procedures in place for the completion of interstate child abuse and neglect checks, the implementation is not yet complete. The information is currently being requested from every state, however other states do not reply within the required timelines, or at all. Some states have refused to provide the information. Additionally, cities with local option licensing (as allowed in Idaho statute) are unable to access or request this information from every state.

Licensed Providers:

16.06.02.009. CRIMINAL HISTORY AND BACKGROUND CHECK REQUIREMENTS.

16.06.02.009.01. Compliance with Department Criminal History and Background Check. Criminal history and background checks are required for individuals who are licensed under these rules. Individuals who are required to have a criminal history check must comply with IDAPA 16.05.06, "Criminal History and Background Checks," with the exception of those individuals described in Subsection 009.04 of this rule.

16.06.02.009.02. When License is Granted. The applicant must have a completed criminal history and background check, including clearance, prior to licensure. Any other adult living in the home must complete a criminal history application, must be fingerprinted, and must not have any disqualifying crimes listed in IDAPA 16.05.06, "Criminal History and Background Checks." (4-7-11)

16.06.02.009.03. Individuals Subject to Criminal History Check Requirements. The following individuals must receive a criminal history and background check clearance prior to licensure: (4-7-11)

16.06.02.009.03.f. Daycare Center, Group Daycare Facility, and Family Day Care Home. The criminal history and background check requirements applicable to a daycare center, group daycare facility, and family daycare home are found in Section 309 of these rules and in Sections 39-1105, 39-1113, and 39-1114, Idaho Code.

16.06.02.309. CRIMINAL HISTORY AND BACKGROUND CHECK FOR DAYCARE STANDARDS.

16.06.02.309.01. Criminal History and Background Check for Daycare Centers and Group Daycare Facilities. Each owner, operator, or applicant seeking

licensure for a daycare center, group daycare facility, or a family daycare home must submit evidence that is satisfactory to the Department that the following individuals have successfully completed and received a clearance for a Department criminal history and background check under the provisions of Sections 39-1105 and 39-1113, Idaho Code: (4-7-11)

16.06.02.309.01.a. Owners, operators, and staff; (4-7-11)

16.06.02.309.01.b. All other individuals thirteen (13) years of age or older who have unsupervised direct contact with children; or (4-7-11)

16.06.02.309.01.c. All other individuals thirteen (13) years of age or older who are regularly on the premises. (4-7-11)

Idaho Code 39-1105. CRIMINAL HISTORY CHECKS. (1) The department shall obtain from the owner a criminal history check on the owners, operators and employees of a daycare facility who have direct contact with children, and on all other individuals thirteen (13) years of age or older who have unsupervised direct contact with children or are regularly on the premises of a daycare facility.

16.05.06.001.03. Policy. It is the Department's policy to conduct fingerprint-based criminal history and background checks on individuals who have completed a criminal history application. The criminal history applicant is required to disclose any pertinent information regarding crimes or findings that would disqualify the individual from providing care or services to children or vulnerable adults. The Department may obtain information for these criminal history and background checks from the following sources: (7-1-17)

16.05.06.001.03.d. Any state or federal Child Protection Registry; (7-1-17)

16.05.06.001.03.e. Any state or federal Adult Protection Registry; (7-1-17)

ICCP Providers:

IDAPA 16.06.12.009- Criminal History and Background Check Requirements.

16.06.12.009.01. Compliance with Department Criminal History and Background Check. Criminal history and background checks are required for ICCP providers. Providers who are required to have a criminal history check must comply with IDAPA 16.05.06, "Criminal History and Background Checks." (4-9-09)

16.06.12.009.02. ICCP Provider is Approved. The ICCP provider must have completed a criminal history and background check, and received a clearance, prior to becoming an ICCP provider.

16.06.12.009.04. Applicants, Providers, and Other Individuals Subject to Criminal History Check Requirements. The following applicants, providers, and other individuals listed below must submit evidence to the Department

that the following individuals have successfully completed and received a Department criminal history and background check clearance: (3-2-17)

16.06.12.009.04.a. All child care centers group, family, relative, and in-home providers including owners, operators, and staff, who have direct contact with children; (3-2-17)

16.06.12.009.04.b. All individuals thirteen (13) years of age or older who have direct contact with children; and (3-2-17)

16.06.12.009.04.c. All individuals thirteen (13) years of age or older who are regularly on the premises. (3-2-17)

16.05.06.001.03. Policy. It is the Department's policy to conduct fingerprint-based criminal history and background checks on individuals who have completed a criminal history application. The criminal history applicant is required to disclose any pertinent information regarding crimes or findings that would disqualify the individual from providing care or services to children or vulnerable adults. The Department may obtain information for these criminal history and background checks from the following sources: (7-1-17)

16.05.06.001.03.d. Any state or federal Child Protection Registry; (7-1-17)

16.05.06.001.03.e. Any state or federal Adult Protection Registry; (7-1-17)

b) Has the interstate child abuse and neglect check been put in place for all current (existing) child care staff?

- ☐ Yes. Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.
- ☒ No. (Waiver request allowed. See Appendix A.) Describe the status of conducting the interstate child abuse and neglect check for current (existing) child care staff including:
- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated, or registered programs
 - Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers)
 - Key challenges to fully implementing this requirement
 - Strategies used to address these challenges

Describe:

While Idaho has the statute, administrative code, and procedures in place for the completion of interstate child abuse and neglect checks, the implementation is not

yet complete. The information is currently being requested from every state, however other states do not reply within the required timelines, or at all. Some states have refused to provide the information. Additionally, cities with local option licensing (as allowed in Idaho statute) are unable to access or request this information from every state.

Licensed Providers:

16.06.02.009. CRIMINAL HISTORY AND BACKGROUND CHECK REQUIREMENTS.

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16.06.02.009.02. When License is Granted. The applicant must have a completed criminal history and background check, including clearance, prior to licensure. Any other adult living in the home must complete a criminal history application, must be fingerprinted, and must not have any disqualifying crimes listed in IDAPA 16.05.06, "Criminal History and Background Checks." (4-7-11)

16.06.02.009.03. Individuals Subject to Criminal History Check Requirements. The following individuals must receive a criminal history and background check clearance prior to licensure: (4-7-11)

16.06.02.009.03.f. Daycare Center, Group Daycare Facility, and Family Day Care Home. The criminal history and background check requirements applicable to a daycare center, group daycare facility, and family daycare home are found in Section 309 of these rules and in Sections 39-1105, 39-1113, and 39-1114, Idaho Code.

16.06.02.309. CRIMINAL HISTORY AND BACKGROUND CHECK FOR DAYCARE STANDARDS.

16.06.02.309.01. Criminal History and Background Check for Daycare Centers and Group Daycare Facilities. Each owner, operator, or applicant seeking licensure for a daycare center, group daycare facility, or a family daycare home must submit evidence that is satisfactory to the Department that the following individuals have successfully completed and received a clearance for a Department criminal history and background check under the provisions of Sections 39-1105 and 39-1113, Idaho Code: (4-7-11)

16.06.02.309.01.a. Owners, operators, and staff; (4-7-11)

16.06.02.309.01.b. All other individuals thirteen (13) years of age or older who have unsupervised direct contact with children; or (4-7-11)

16.06.02.309.01.c. All other individuals thirteen (13) years of age or older who are regularly on the premises. (4-7-11)

Idaho Code 39-1105. CRIMINAL HISTORY CHECKS. (1) The department shall obtain from the owner a criminal history check on the owners, operators and employees of a daycare facility who have direct contact with children, and on all other individuals thirteen (13) years of age or older who have unsupervised direct contact with children or are regularly on the premises of a daycare facility.

16.05.06.001.03. Policy. It is the Department's policy to conduct fingerprint-based criminal history and background checks on individuals who have completed a criminal history application. The criminal history applicant is required to disclose any pertinent information regarding crimes or findings that would disqualify the individual from providing care or services to children or vulnerable adults. The Department may obtain information for these criminal history and background checks from the following sources: (7-1-17)

16.05.06.001.03.d. Any state or federal Child Protection Registry; (7-1-17)

16.05.06.001.03.e. Any state or federal Adult Protection Registry; (7-1-17)

ICCP Providers:

IDAPA 16.06.12.009- Criminal History and Background Check Requirements.

16.06.12.009.01. Compliance with Department Criminal History and Background Check. Criminal history and background checks are required for ICCP providers. Providers who are required to have a criminal history check must comply with IDAPA 16.05.06, "Criminal History and Background Checks." (4-9-09)

16.06.12.009.02. ICCP Provider is Approved. The ICCP provider must have completed a criminal history and background check, and received a clearance, prior to becoming an ICCP provider.

16.06.12.009.04. Applicants, Providers, and Other Individuals Subject to Criminal History Check Requirements. The following applicants, providers, and other individuals listed below must submit evidence to the Department that the following individuals have successfully completed and received a Department criminal history and background check clearance: (3-2-17)

16.06.12.009.04.a. All child care centers group, family, relative, and in-home providers including owners, operators, and staff, who have direct contact with children; (3-2-17)

16.06.12.009.04.b. All individuals thirteen (13) years of age or older who have direct contact with children; and (3-2-17)

16.06.12.009.04.c. All individuals thirteen (13) years of age or older who are regularly on the premises. (3-2-17)

16.05.06.001.03. Policy. It is the Department's policy to conduct fingerprint-based criminal history and background checks on individuals who have completed a criminal history application. The criminal history applicant is required to disclose any pertinent information regarding crimes or findings that would disqualify the individual from providing care or services to children or vulnerable adults. The Department may obtain information for these criminal history and background checks from the following sources: (7-1-17)

16.05.06.001.03.d. Any state or federal Child Protection Registry; (7-1-17)

16.05.06.001.03.e. Any state or federal Adult Protection Registry; (7-1-17)

Provisional Employment

The CCDF Final Rule states a child care provider must submit a request to the appropriate state/territory agency for a criminal background check for each child care staff member, including prospective staff members, prior to the date an individual becomes a child care staff member and at least once every 5 years thereafter (98.43(d)(1) and (2)). A prospective child care staff member may not begin work until one of the following results have been returned as satisfactory: either the FBI fingerprint check or the search of the state/territory criminal registry or repository using fingerprints in the state/territory where the staff member resides. The child care staff member must be supervised at all times pending completion of all the background check components (98.43(d)(4)).

Note: In recognition of the concerns and feedback OCC received related to the provisional hire provision of the CCDF Final Rule, OCC will allow states and territories to request time-limited waiver extensions for the provisional hire provision. State/territories may submit a waiver request to allow additional time to meet the requirements related to provisional hires (see Appendix A). A state/territory may receive a waiver from this requirement only when:

1. the state requires the provider to submit the background check requests before the staff person begins working; and
2. the staff member, pending the results of the elements of the background check, is supervised at all times by an individual who has completed the background check.

5.4.9 Describe the state/territory requirements related to prospective child care staff members using the checkboxes below (Waiver request allowed. See Appendix A). Check all that apply.

- ☐ The state/territory allows prospective staff members to begin work on a provisional basis (if supervised at all times) after completing and receiving satisfactory results on either the FBI fingerprint check or a fingerprint check of the state/territory

criminal registry or repository in the state where the child care staff member resides. Describe and include a citation: [\[redacted\]](#)

- ☐ The state/territory allows prospective staff members to begin work on a provisional basis (if supervised at all times) after the request has been submitted, but before receiving satisfactory results on either the FBI fingerprint check or a fingerprint check of the state/territory criminal registry or repository in the state where the child care staff member resides. Note: A waiver request is allowed for this provision (see Appendix A). Describe and include a citation: [\[redacted\]](#)

- ☒ Other. Describe

Currently, Idaho does not allow staff to work on a provisional basis. Idaho is requiring the issuance of a clearance prior to an employee beginning work with children. However, the state is considering issuing a provisional clearance once the FBI fingerprint check has been completed. The current system and procedures do not support this option, additional research is required.

ICCP Providers:

IDAPA 16.06.12.009- Criminal History and Background Check Requirements.

16.06.12.009.01. Compliance with Department Criminal History and Background Check. Criminal history and background checks are required for ICCP providers. Providers who are required to have a criminal history check must comply with IDAPA 16.05.06, "Criminal History and Background Checks." (4-9-09)

16.06.12.009.02. ICCP Provider is Approved. The ICCP provider must have completed a criminal history and background check, and received a clearance, prior to becoming an ICCP provider.

Licensed Providers:

16.06.02.309. CRIMINAL HISTORY AND BACKGROUND CHECK FOR DAYCARE STANDARDS.

16.06.02.309.01. Criminal History and Background Check for Daycare Centers and Group Daycare Facilities. Each owner, operator, or applicant seeking licensure for a daycare center, group daycare facility, or a family daycare home must submit evidence that is satisfactory to the Department that the following individuals have successfully completed and received a clearance for a Department criminal history and background check under the provisions of Sections 39-1105 and 39-1113, Idaho Code: (4-7-11)

16.06.02.309.01.a. Owners, operators, and staff; (4-7-11)

16.06.02.309.01.b. All other individuals thirteen (13) years of age or older who have unsupervised direct contact with children; or (4-7-11)

16.06.02.309.01.c. All other individuals thirteen (13) years of age or older who are regularly on the premises. (4-7-11)

- 5.4.10 The state/territory must conduct the background checks as quickly as possible and shall not exceed 45 days after the child care provider submitted the request. The state/territory shall provide the results of the background check in a statement that indicates whether the staff member is eligible or ineligible, without revealing specific disqualifying information. If the staff member is ineligible, the state/territory will provide information about each disqualifying crime to the staff member.

Describe the requirements, policies, and procedures in place to respond as expeditiously as possible to other states', territories', and tribes' requests for background check results to accommodate the 45-day timeframe, including any agencies/entities responsible for responding to requests from other states (98.43(a)(1)(iii)).

16.05.06.125. IDAHO CHILD PROTECTION CENTRAL REGISTRY CHECKS. The Department will provide the results of a check of the Idaho Child Protection Central Registry to any agency that requires it to comply with the provisions of applicable federal or state law. The Department will process those requests as described in this rule. (7-1-17)

01. Request for an Idaho Child Protection Central Registry Check. A request for an Idaho Child Protection Central Registry check must be submitted by mail, facsimile transmission, or e-mail attachment on state or agency letterhead with the requesting authority contact information, and must include the following: (7-1-17)

- a. Name of the subject of the check, and any aliases; (4-7-11)
- b. Date of birth and Social Security Number of the subject of the check; and (4-7-11)
- c. A notarized signature of the subject of the check authorizing the request. (4-7-11)

02. Fee Amount. The fee for an Idaho Child Protection Central Registry check is twenty dollars (\$20) for each subject checked. (4-7-11)

03. Department Response. A response will be returned to the agency initiating the request for the check within fourteen (14) days of receipt of the request. The Department's contact information will be included along with the result of the check. (7-1-17)

- 5.4.11 Child care staff members cannot be employed by a child care provider receiving CCDF subsidy funds if they refuse a background check, make materially false statements in connection with the background check, or are registered or required to be registered on the state or National Sex Offender Registry. Potential staff members also cannot be employed by a provider receiving CCDF funds if they have been convicted of: a felony consisting of murder, child abuse or neglect, crimes against children, spousal abuse, crimes involving rape or sexual assault, kidnapping,

arson, physical assault or battery, or—subject to an individual review (at the state/territory's option)—a drug-related offense committed during the preceding 5 years; a violent misdemeanor committed as an adult against a child, including the following crimes—child abuse, child endangerment, or sexual assault; or a misdemeanor involving child pornography (98.43(c)(1)).

Note: The Lead Agency may not publicly release the results of individual background checks. It may release aggregated data by crime as long as the data do not include personally identifiable information (98.43(e)(2)(iii)).

Does the state/territory disqualify child care staff members based on their conviction for other crimes not specifically listed in 98.43(c)(i)?

- ☐ No
- ☒ Yes. Describe other disqualifying crimes and provide citation: **IDAPA 16.05.06 A** disqualifying offense is a specific offense which prevents an applicant from receiving a background check clearance. If an applicant is found to have a disqualifying offense listed below, they will be issued an unconditional denial and not allowed to provide services or receive licensure or certification. Disqualifying Offenses/Relevant Records – Permanent (Effective 07/01/2017) A relevant record on either the state or federal sex offender registries; A relevant record on the Nurse Aide Registry; A relevant record on the state or federal Medicaid Exclusion Lists. A relevant record or finding on any Child Protection Registry (Enhanced Background Checks Only); Abandoning a vulnerable adult; Abuse, Neglect, or exploitation of a vulnerable adult; Aggravated, first-degree and second-degree arson; Any felony punishable by death or life imprisonment; Attempt, conspiracy, accessory after the fact, or aiding and abetting to commit any of the disqualifying designated crimes; Attempted strangulation; Crimes against nature; Enticing of children; Felony domestic violence; Felony sexual abuse or exploitation of a child Felony stalking; Forcible sexual penetration by use of a foreign object; Hiring, employing, or using a minor to engage in certain acts; Human trafficking; Incest; Inducing individuals under eighteen (18) years of age into prostitution or patronizing a prostitute; Injury to a child, felony or misdemeanor; Kidnapping; Lewd conduct with a minor; Mayhem; Murder in any degree or Assault with intent to commit murder; Poisoning; Rape, in any degree; Ritualized abuse of a child; Robbery; Sale or barter of a child; Sexual abuse and exploitation of a vulnerable adult; Sexual battery of a minor child under sixteen (16) years of age; Video Voyeurism; Voluntary manslaughter, involuntary manslaughter, or felony vehicular manslaughter. Disqualifying Five Year Offenses (Effective 07/01/2017) Any felony not listed in the permanent disqualifying list; Misdemeanor domestic violence; Failure to report abuse, abandonment or neglect of a child; Misdemeanor forgery of and fraudulent use of a financial transaction card; Misdemeanor forgery and counterfeiting; Misdemeanor identity theft; Misdemeanor insurance fraud; Public assistance fraud; Sexual exploitation of a child by electronic means, felony or misdemeanor; Stalking in the second degree; Misdemeanor vehicular manslaughter; Sexual exploitation by a medical care provider; Operating a certified family home without certification; Attempt, conspiracy, accessory after the fact, or aiding and abetting to commit any of the disqualifying five (5) year crimes A materially false statement made knowingly in connection to the Department's criminal history and background check application (Enhanced Background Checks Only)

5.4.12 The state/territory has a process for a child care staff member to appeal the the results of his or her background check to challenge the accuracy or completeness of the criminal background report, as detailed in 98.43(e)(3). Describe how the Lead Agency ensures the privacy of background checks and provides opportunities for applicants to appeal the results of background checks. In addition, describe whether the state/territory has a review process for individuals disqualified due to a felony drug offense to determine if that individual is still eligible for employment (98.43(e)(2–4)).

The Idaho Department of Health and Welfare conducts criminal history background checks on various classes of individuals who have access to, or provide care or services to children or vulnerable adults, as required by regulation. The criminal history background check is a fingerprint based check of state and national crime records and various registries.

CONFIDENTIALITY OF RECORDS AND PUBLIC RECORDS REQUESTS

01. Confidential Records. Any information about an individual covered by these rules and contained in Department records must comply with IDAPA: 16.05.01, “Use and Disclosure of Department Records.”

02. Federal Bureau of Investigation Records. Any information received from the FBI must comply with 28 CFR 50.12 or other federal regulations.

03. Idaho State Police Records. Any information received from the Idaho State Police must comply with Section 67-3008, Idaho Code.

04. Public Records Requests. The Department of Health and Welfare will comply with Title, 74, Chapter 1, Idaho Code, when requests for the examination and copying of public records are made. Unless otherwise exempt in Title, 74, Chapter 1, Idaho Code, and other state and federal laws and regulations, all public records in the custody of the Department of Health and Welfare are subject to disclosure.(IDAPA: 16.05.06.006)

TIME FRAME FOR SUBMITTING APPLICATION AND FINGERPRINTS. The completed notarized application and fingerprints must be received by the Department within twenty-one (21) days from the date of notarization whether submitted by mail or at a Department fingerprinting location.

01. Availability to Provide Services. The applicant:

a. Is available to provide services on the day the application is signed and notarized, as long as the applicant has not disclosed any disqualifying crimes or relevant records. The applicant must provide the Department a copy of the signed and notarized application to validate the date of applicant’s availability to provide services.

b. Becomes unavailable to provide services or be licensed or certified when the notarized application is not received or the fingerprints have not been collected within this time frame.

c. Who submits a complete application and fingerprints by mail, and the application is deemed inadequate or incomplete for processing by the Department, is unavailable to provide services until the application is received by the Department completed and corrected.

02. Incomplete Application. The criminal history and background check is incomplete and will not be processed by the Department if this time frame is not met.

03. No Extension of Time Frame. The Department will not extend the twenty-one (21) day time frame, unless the applicant or employer provides just cause. An applicant for employment or employer can not submit a new application for the same purpose, or repeatedly re-sign and re-notarize the original application. (IDAPA: 16.05.06.150)

ADMINISTRATIVE APPEALS.

01. Appeals. Appeals and proceedings are governed by IDAPA: 16.05.03, “Rules Governing Contested Case Proceedings and Declaratory Rulings.”

02. Appeal of FBI Records. If an individual believes that the records received through the FBI are incorrect, the individual has fifteen (15) days from the receipt of the denial to correct the FBI records according to 28 CFR Section 16.34 or other federal regulations. (IDAPA: 16.05.06.003).

Any felony not listed on our Permanently Disqualifying Offense List disqualifies a person from participating with child care activities for 5 years from the date of the conviction. After 5 years, an applicant may reapply to be considered. (<https://chu.dhw.idaho.gov/>)

- 5.4.13 The state/territory may not charge fees that exceed the actual costs of processing applications and administering a criminal background check (98.43(f)). Describe how the state/territory ensures that fees charged for completing the background checks do not exceed the actual cost of processing and administration, regardless of whether they are conducted by the state/territory or a third-party vendor or contractor. Lead Agencies can report that no fees are charged if applicable (98.43(f)). **Fees for Criminal History Unit Background Checks are set in rules and approved by the state legislature. Fees only cover the cost of administering background checks. (IDAPA: 16.06.06.050)**
- 5.4.14 Federal requirements do not address background check requirements for relative providers who receive CCDF; therefore, states have the flexibility to decide which background check requirements relative providers must meet, as defined by CCDF in 98.2 under eligible child care provider. Note: This exception only applies if the individual cares only for relative children. Does the state/territory exempt relatives from background checks?
- ☒ No, relatives are not exempt from background check requirements.
 - ☐ Yes, relatives are exempt from all background check requirements.
 - ☐ Yes, relatives are exempt from some background check requirements. If the state/territory exempts relatives from some background check requirements, describe which background check requirements do not apply to relative providers.

6 Recruit and Retain a Qualified and Effective Child Care Workforce

This section covers the state or territory framework for training, professional development, and post-secondary education (98.44(a)); provides a description of strategies used to strengthen the business practices of child care providers (98.16(z)); and addresses early learning and developmental guidelines.

States and territories are required to describe their framework for training, professional development, and post-secondary education for caregivers, teachers, and directors, including those working in school-age care (98.44(a)). **This framework is part of a broader systematic approach building on health and safety training (as described in section 5) within a state/territory.** States and territories must incorporate their knowledge and application of health and safety standards, early learning guidelines, responses to challenging behavior, and the engagement of families. States and territories are required to establish a progression of professional development opportunities to improve the knowledge and skills of CCDF providers (658E(c)(2)(G)). To the extent practicable, professional development should be appropriate to work with a population of children of different ages, English-language learners, children with disabilities, and Native Americans (98.44(b)(2)(iv)). Training and professional development is one of the options that states and territories have for investing their CCDF quality funds (658G(b)(1)).

6.1 Professional Development Framework

- 6.1.1 Each state or territory must describe their professional development framework for training, professional development, and post-secondary education for caregivers, teachers and directors, which is developed in consultation with the State Advisory Council on Early Childhood Education and Care or similar coordinating body. The framework should include these components: (1) professional standards and competencies, (2) career pathways, (3) advisory structures, (4)

articulation, (5) workforce information, and (6) financing (98.44(a)(3)). Flexibility is provided on the strategies, breadth, and depth with which states and territories will develop and implement their framework.

- a) Describe how the state/territory's framework for training and professional development addresses the following required elements:
- State/territory professional standards and competencies. Describe: **IdahoSTARS professional development standards utilize the Ten Core Knowledge Components for Early Care and Education and were implemented in 2004, reviewed and updated to reflect current research. The Idaho Early Learning eGuidelines are the most current, research-based standards in Idaho. They are the result of a two-year study and revision process by a team of Idaho's dedicated early childhood professionals. All IdahoSTARS approved training is categorized within the Ten Core Knowledge Components and embed the Early Learning eGuidelines into the content.**
 - Career pathways. Describe: **The IdahoSTARS Early Childhood Care and Education Career Pathway contains six levels beginning with Level 1 PDS (Professional Development System) which reflects Entry and/or completed Essential Training. Level 2 requires a CDA credential. Level 3 requires a Technical Certificate in ECE. Level 4 requires an Associate Degree in ECE. Level 5 requires a Bachelor Degree in ECE; Level 6 requires a Master Degree or higher in ECE. Please note: levels that require ECE degrees include related fields and/or may also include degrees from any discipline accompanied by a set number of credits in ECE.**
 - Advisory structure. Describe: **The Idaho Child Care Program (ICCP) Advisory Panel is composed of representatives from across the state who offer unique perspectives on child care. Panel members are appointed by the Governor to serve a minimum of one term (3 years) and who meet on a quarterly basis. The Advisory Panel reviews and offers guidance to the State Administrator on issues revolving around ICCP (Idaho State's CCDF funded child care program) and the IdahoSTARS program, including program development, revision and implementation. In response to the CCDBG reauthorization, the ICCP panel provides guidance for the annual health and safety required training.**
 - Articulation. Describe: **IdahoSTARS cross walked the essential knowledge of the Essential Trainings with the content of the 2 year institution early childhood programs. The purpose being to incentivize providers taking college courses while working in the field of child care. This is a one-way agreement in which professionals may opt out of essential trainings required in the QRIS, due to the fact that college coursework is more rigorous than professional development trainings. There is a specific process to follow for those wishing to participate in the articulation. It was finalized in September of 2016. As Essential Trainings have been updated, the higher education faculty have been provided that content so the coursework also reflects those changes. As of April 2018, no providers have applied to participate in the articulation, however the benefit of this work remains in the partnerships and collaboration between IdahoSTARS and 2 year higher education institutions. IdahoSTARS participates in the Early Childhood Education Consortium, which meets once a year with representatives from all higher education institutions and state agencies for program updates.**

- Workforce information. Describe: IdahoSTARS completed a statewide survey of the early care and education workforce that included a specific focus on child care. The data continues to be disseminated and utilized to inform policy makers, business owners, directors, educators, parents, child care providers, service providers, among others across Idaho. With the additional ICCP training requirements as a result of the reauthorization, we are looking forward to analyzing data and looking for trends that the increased training requirements may impact.
- Financing. Describe: The IdahoSTARS Early Childhood Care and Education Career Pathway offers different means to receive an incentive, that includes a Level Move Award and an Anniversary Award. If the provider is employed by a facility verified at Step 1 or higher in our QRIS system, Steps to Quality, the provider receives an additional incentive tied to their anniversary award. The Level Move is awarded to a provider upon achieving a degree in ECE or a related field and accordingly, moves up a level on the Career Pathway. An Anniversary Award is achieved by a provider upon completion of 15 IdahoSTARS approved training hours or 1 ECE college credit or related college credit within their anniversary cycle. Longevity is recognized and is a component of the Anniversary Award.

b) The following are optional elements, or elements that should be implemented to the extent practicable, in the training and professional development framework.

- ☒ Continuing education unit trainings and credit-bearing professional development to the extent practicable. Describe: Continuing education unit trainings and credit-bearing professional development to the extent practicable. Describe: The framework for professional development for IdahoSTARS incorporates both continuing education unit trainings and credit-bearing professional development. Continuing education unit trainings are calculated by the training hours equivalency and recorded on a provider's individual training log. Credit-bearing professional development is verified through individual transcripts and/or diploma(s). The provider is then placed on the appropriate level on the IdahoSTARS Early Childhood Care and Education Career Pathway based on their education. Providers can use both continuing education unit trainings and credit-bearing professional development to receive monetary awards in the IdahoSTARS Professional Development System Registry.
- ☐ Engagement of training and professional development providers, including higher education, in aligning training and educational opportunities with the state/territory's framework. Describe:
- ☐ Other. Describe:

6.1.2 Describe how the state/territory developed its professional development framework in consultation with the State Advisory Council on Early Childhood Education and Care (if applicable) or similar coordinating body if there is no SAC that addresses the professional development, training, and education of child care providers and staff. IdahoSTARS worked closely with the Early Childhood Coordinating Council (EC3), the State

Advisory Council established under executive order with positions on the council appointed by the governor. This body of council members, in partnership with multiple entities and professionals in the ECE field, created and published the Core Knowledge and Competencies for Early Care and Education. IdahoSTARS has embedded the knowledge components in approved training; they are tracked in the state database and on individual training logs, and are regularly reviewed and updated to reflect current research and evidence based practices. The 10 Core Knowledge Components, have been revised in Spring 2018 and reflect Seven Domains; Child Development, Curriculum and Instruction, Health, Safety, and Wellness, Environments, Inclusion and Diversity, Partnerships with Families and Community, and Business Practices. These Seven Domains are used to identify and track training and technical assistance and/or coaching content. Core Knowledge Components were vetted through the ICCP Advisory Panel and the Early Childhood Coordinating council for approval, revisions are presented to the ICCP Advisory Panel for input and approval.

6.1.3 Describe how the framework improves the quality, diversity, stability, and retention of caregivers, teachers, and directors (98.44(a)(7)).

Financial assistance to attain credentials and post-secondary degrees. Describe:

Idaho relies on the IdahoSTARS CCR&R staff, Scholarship Counselors, the Professional Development System online overview and supporting materials, Idaho's Quality Rating and Improvement System (QRIS) Steps to Quality (STQ), the IdahoSTARS website, college instructors, and child care program directors to recruit child care providers to apply for training and academic scholarships. In an effort to retain providers, IdahoSTARS offers educational scholarships as an incentive to complete college courses for academic credit. An Academic Scholarship covers 100% of tuition costs for 9-16 credits each academic year, release time for family providers and upon successful completion of each scholarship year, a 2% raise is awarded by the employer, as agreed upon in the scholarship application. If an early childhood degree or credential (CDA, Technical Certificate, Associate or Bachelor) is completed, the scholar receives a level move award. IdahoSTARS also offers a scholarship that covers tuition costs for a provider to complete one college course.

Financial incentives linked to educational attainment and retention. Describe:

The IdahoSTARS Early Childhood Care and Education Career Pathway offers different options to receive an incentive. An Anniversary Award is achieved by eligible providers upon completion of 15 hours of approved training or completion of at least 1 college credit in ECE or related field within their anniversary cycle. The Level Move Award is achieved upon completion of a certification or academic degree that moves the provider to a higher level on the Career Pathway. Additional incentives are awarded to providers employed by a facility verified at a Step One or higher in our QRIS system, Steps to Quality. Longevity is also recognized within the anniversary award and is based on a child care provider's years of participation in professional development.

Outreach to high school (including career and technical) students. Describe:

Outreach goals include: (1) Engage with high school students through their career and technical programs as well as FCCLA (Family, Career, and Community Leaders of America) chapters to bring more awareness to child care as a profession; (2) Work with the Idaho Consortium for the Preparation of Early Childhood Professionals to resurrect an online AA(S) program that may have concurrent credits for high school students; (3) Host college and

career fairs on both the local and state level to better inform high school students and child care providers of their professional options.

6.2 Training and Professional Development Requirements

The Lead Agency must describe how its established health and safety requirements for pre-service or orientation training and ongoing professional development requirements—as described in Section 5 for caregivers, teachers, and directors in CCDF programs—align, to the extent practicable, with the state/territory professional development framework. These requirements must be designed to enable child care providers to promote the social, emotional, physical, and cognitive development of children and to improve the knowledge and skills of the child care workforce. Such requirements shall be applicable to child care providers caring for children receiving CCDF funds across the entire age span, from birth through age 12 (658E(c)(2)(G)). Ongoing training and professional development should be accessible and appropriate to the setting and age of the children served (98.44(b)(2)).

- 6.2.1 Describe how the state/territory incorporates the knowledge and application of its early learning and developmental guidelines (where applicable); its health and safety standards (as described in section 5); and social-emotional/behavioral and early childhood mental health intervention models, which can include positive behavior intervention and support models (as described in section 2) in the training and professional development framework (98.44(b)). IdahoSTARS Essential Training and technical assistance/coaching includes curriculum with a focus on promoting the social, emotional, physical, and cognitive development of children, including those related to nutrition and physical activity using scientifically-based, developmentally appropriate and age-appropriate strategies. IdahoSTARS Essential Training and technical assistance/coaching includes curriculum with content that focuses on the implementation of behavior management strategies. The strategies include positive behavior interventions and support models, promotes positive social-emotional development and early childhood mental health, with a focus on reducing challenging behaviors and expulsion from child care programs. The Essential Training is a component of Idaho's QRIS, Steps to Quality, and has been developed as a series of training that builds upon foundational information from one step to the next. IdahoSTARS developed 7 Domains, which align with national standards, to categorize training and coaching content areas. The Approved IdahoSTARS Training Course Catalog is categorized by the 7 Domains. Many in-house developed IdahoSTARS Approved Training are incorporating a train/coach model to increase the probability of training content integration to practice. Within these efforts, a new statewide Addressing Challenging Behaviors train/coach model training series will be available in 2019.
- 6.2.2 Describe how the state/territory's training and professional development are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF funds (as applicable) (98.44(b)(2)(vi)). Idaho's training and professional development opportunities and requirements are accessible to child care provides who are members of Idaho's training and professional development opportunities and requirements are accessible to child care provides who are members of Indian tribes in the same manner as all other provides in the state. CCR&R staff update provider files for members of Idaho's Indian tribes twice yearly, offer access and participation

with the lending library, complete referrals, and provide coaching and mentoring supports as with all providers in Idaho. There is no separation or differentiation between how IdahoSTARS engages with and supports tribal members from anyone else who is caring for children in Idaho.

6.2.3 States/territories are required to facilitate participation of child care providers with limited English proficiency and disabilities in the subsidy system (98.16 (dd)). Describe how the state/territory will recruit and facilitate the participation of providers:

a) with limited English proficiency.

IdahoSTARS employs a Multicultural Outreach Coordinator and bilingual staff to support participation of providers with limited English proficiency. IdahoSTARS works in partnership with the JANNUS organization's Refugee Childcare Business Development (RCBD) program to recruit and support individuals living in refugee resettlement that are interested in providing child care and participating in ICCP. This partnership offers a variety of support for CCDF eligibility.

b) who have disabilities.

IdahoSTARS is a project of the Center on Disabilities and Human Development (CDHD) which actively supports individuals with disabilities in personal and professional inclusion.

6.2.4 Describe how the state/territory's training and professional development requirements are appropriate, to the extent practicable, for child care providers who care for children receiving child care subsidies, including children of different age groups (such as specialized credentials for providers who care for infants and/or school-age children); English-language learners; children with developmental delays and disabilities; and Native Americans, including Indians and Native Hawaiians (98.44(b)(2)(iii–iv)). IdahoSTARS offers approved training that is evidence based and designed to provide information that assists child care providers with developing an understanding and increasing their knowledge and awareness of best practices, strategies, practical tools, and skills across the domains and clearly linked to the Idaho Early Learning eGuidelines. All trainers receive information and guidance on adult learning, and are required to include modifications of training content and training materials to include all children and families with a special focus on child development, poverty, disabilities, family structure, languages, and cultures.

6.2.5 The Lead Agency must provide training and technical assistance to providers and appropriate Lead Agency (or designated entity) staff on identifying and serving children and families experiencing homelessness (658E(c)(3)(B)(i)).

a) Describe the state/territory's training and TA efforts for providers in identifying and serving children and their families experiencing homelessness (relates to question 3.2.2).

IdahoSTARS offers approved training that is evidence based and designed to provide information that assists child care providers with developing an understanding and increasing their knowledge and awareness of best practices, strategies, practical tools, and skills across the domains and clearly linked to the Idaho Early Learning eGuidelines. All trainers receive information and guidance on adult learning, and are required to include modifications of training content and training materials to include all children

and families with a special focus on child development, poverty, disabilities, family structure, languages, and cultures.

- b) Describe the state/territory's training and TA efforts for Lead Agency (or designated entity) staff in identifying and serving children and their families experiencing homelessness (connects to question 3.2.2). **A webinar is delivered to all IdahoSTARS staff with content focusing on families experiencing homelessness and the Strengthening Families Protective Factors. IdahoSTARS staff received training from the Idaho Department of Health and Welfare on policy and operational approaches to implementing the Re-Authorization. Content includes training on subsidy eligibility for families experiencing homelessness, immunization requirements, description of a new process to verify participation with a homeless agency to confirm subsidy eligibility and how to help families apply.**

6.2.6 States and territories are required to describe effective internal controls that are in place to ensure program integrity and accountability (98.68(a)). Describe how the state/territory ensures that all providers for children receiving CCDF funds are informed and trained regarding CCDF requirements and integrity (98.68(a)(3)). Check all that apply.

- ☒ Issue policy change notices

Policy change letters are sent to all providers when major policy changes are being implemented. Routine notices are updated as policies change.

- ☐ Issue new policy manual

- ☒ Staff training

Internal staff are provided updates via the Staff Only web pages, team conference calls and web meetings, and at the annual summit.

- ☒ Orientations

An orientation is required for all new providers participating in the Idaho Child Care Program as part of the onboarding process. The orientation reflects current requirements and guidance how to access additional information and assistance.

- ☐ Onsite training

We do not provide "onsite training" to child care providers on the new requirements.

- ☐ Online training

We do not provide "online training" to child care providers on the new requirements.

- ☒ Regular check-ins to monitor the implementation of CCDF policies. **Describe the type of check-ins, including the frequency. Annual health and safety inspection. Annual Health and Safety Inspections are conducted by the district health departments.**

- ☒ Other. Describe: **The IdahoSTARS web page offers information about the Idaho Child Care Program and is updated to reflect current requirements. CCR&R staff provide TA phone calls upon request to explain changes and answer questions; CCR&R offer**

onsite visits to child care programs and upon referral or request to support understanding and implementation of new requirements. In-office and onsite “Roundtables” may be offered by CCR&R staff to child care providers/directors to present new requirements, field questions and share ideas when the state makes significant changes. These are group TA events that are offered as needed.

6.2.7 Lead Agencies must develop and implement strategies to strengthen the business practices of child care providers to expand the supply and to improve the quality of child care services (98.16 (z)). Describe the state/territory’s strategies to strengthen providers’ business practices, which can include training and/or TA efforts.

a) **Describe** the strategies that the state/territory is developing and implementing for training and TA. **IdahoSTARS has a variety of approved business training that is available online and presented by a trainer. The business training is focused both for center based programs and home-based programs. Idaho’s QRIS, Steps to Quality, has requirements at different steps for the completion of business training. CCR&R staff offer onsite site visits to supplement and support the business practices training and to assist providers with embedding business strategies into their child care business, which includes a focus on business practices required by ICCP. Idaho would like to continue our growth in supporting practices that strengthen a provider’s business practices by facilitating a TA opportunity to IdahoSTARS leadership and in partnership with a small sample of child care providers to learn, conduct, and review the end to end process of using the Provider Cost of Quality Calculator.**

b) Check the topics addressed in the state/territory’s strategies. Check all that apply.

- ☒ Fiscal management
- ☒ Budgeting
- ☒ Recordkeeping
- ☒ Hiring, developing, and retaining qualified staff
- ☒ Risk management
- ☒ Community relationships
- ☒ Marketing and public relations
- ☒ Parent-provider communications, including who delivers the training, education, and/or technical assistance
- ☐ Other. Describe:

6.3 Early Learning and Developmental Guidelines

6.3.1 States and territories are required to develop, maintain, or implement early learning and developmental guidelines that are appropriate for children in a forward progression from birth to kindergarten entry (i.e., birth-to-three, three-to-five, birth-to-five), describing what children should know and be able to do and covering the essential domains of early childhood development. These early learning and developmental guidelines are to be used statewide and territory-wide by child care providers and in the development and implementation of training and professional development (658E(c)(2)(T)). The required essential domains for these

guidelines are cognition, including language arts and mathematics; social, emotional, and physical development; and approaches toward learning (98.15(a)(9)). At the option of the state/territory, early learning and developmental guidelines for out-of-school time may be developed. *Note: States and territories may use the quality set-aside, discussed in section 7, to improve on the development or implementation of early learning and developmental guidelines.*

- a) Describe how the state/territory's early learning and developmental guidelines are research-based, developmentally appropriate, culturally and linguistically appropriate, and aligned with kindergarten entry. **The Early Learning eGuidelines is a comprehensive foundational document whose purpose and function is to provide detailed guidelines and strategies for early childhood development and is designed to guide adult practice and policy making for young children. The electronic format links to important resources, research, and supplemental information enabling opportunities for efficient editing and additions as new information becomes available.**

These Early Learning eGuidelines have been adapted from the products of a number of states, national experts, and professional organizations, a representative group of Idaho educators and professionals generated the Idaho Early Learning eGuidelines utilizing the latest research in early childhood development. Idahoans and national experts revised and refined the product to meet the unique needs and concerns of children, parents, and stakeholders in Idaho.

Idaho's Early Learning eGuidelines are grouped by Domains that are divided by ages, and then described by Goals, Development Growth, Child Indicators, and Caregiver Strategies.

- b) Describe how the state/territory's early learning and developmental guidelines are appropriate for all children from birth to kindergarten entry. **The Early Learning eGuidelines span the early childhood age groups: 0 – 8 months; 6 – 18 months; 16 – 38 months; 36-60 months; 60 months – Kindergarten; First, Second, and Third Grade. The Domains include: Approaches to Learning; Physical Well-Being; Social and Emotional Development; General Knowledge; Communication, Language, and Literacy.**
- c) **Verify by checking the domains** included in the state/territory's early learning and developmental guidelines. **Responses for "other" are optional.**
- ☒ Cognition, including language arts and mathematics
 - ☒ Social development
 - ☒ Emotional development
 - ☒ Physical development
 - ☒ Approaches toward learning
 - ☐ Other. Describe:
- d) Describe how the state/territory's early learning and developmental guidelines are implemented in consultation with the educational agency and the State Advisory Council or similar coordinating body. **Idaho's Early Learning eGuidelines were developed as an online tool for parents and early care and education educators by a team of dedicated early childhood experts who worked closely with the Early Childhood Coordinating Council and the Head Start Collaboration office. These guidelines were vetted through the ICCP Advisory Panel. Through the support of the Early Childhood Coordinating Council (EC3)**

and the Head Start Collaboration office, collateral products were developed for Infants and Toddlers and for Preschool aged children. These materials were disseminated to child care providers across the state by Idaho AEYC and CCR&R staff.

IdahoSTARS approved training are required to reference the Early Learning eGuidelines and trainers include the connection of their training to the eGuidelines during their presentations. The intention is to help build capacity of child care providers to access the online tool when planning their classroom activities.

- e) Describe how the state/territory's early learning and developmental guidelines are updated and include the date first issued and/or the frequency of updates. **Idaho's Early Learning Guidelines were drafted and available in 2008. The Early Learning eGuidelines are in the early stages of revision, with the Head Start Collaboration office taking the lead role with the revision process.**
- f) If applicable, discuss the state process for the adoption, implementation and continued improvement of state out-of-school time standards .
Full text of the Idaho Early Learning eGuidelines
- g) Provide the Web link to the state/territory's early learning and developmental guidelines.
<https://healthandwelfare.idaho.gov/Children/EarlyChildhoodInfo/tabid/80/Default.aspx>

6.3.2 CCDF funds cannot be used to develop or implement an assessment for children that:

- Will be the primary or sole basis to determine a child care provider ineligible to participate in the CCDF,
- Will be used as the primary or sole basis to provide a reward or sanction for an individual provider,
- Will be used as the primary or sole method for assessing program effectiveness,
- Will be used to deny children eligibility to participate in the CCDF (658E(c)(2)(T)(ii)(I); 98.15(a)(2)).

Describe how the state/territory's early learning and developmental guidelines are used.

Idaho's Early Learning eGuidelines are embedded in all IdahoSTARS approved training. Criteria for training approval includes that all training is developmentally appropriate and utilizes evidence-based curricula that is responsive to diverse cultures and languages.

7 Support Continuous Quality Improvement

Lead Agencies are required to reserve and use a portion of their Child Care and Development Fund program expenditures for activities designed to improve the quality of child care services and to increase parental options for and access to high-quality child care (98.53). The quality activities should be aligned with a statewide or territory-wide assessment of the state's or territory's need to carry out such services and care.

States and territories are required to report on these quality improvement investments through CCDF in three ways:

1. In the Plan, states and territories will describe the types of activities supported by quality investments over the 3-year period (658G(b); 98.16(j)).

2. ACF will collect annual data on how much CCDF funding is spent on quality activities using the expenditure report (ACF-696). This report will be used to determine compliance with the required quality and infant and toddler spending requirements (658G(d)(1); 98.53(f)).
3. For each year of the Plan period, states and territories will submit a separate annual Quality Progress Report that will include a description of activities to be funded by quality expenditures and the measures used by the state/territory to evaluate its progress in improving the quality of child care programs and services within the state/territory (658G(d); 98.53(f)).

States and territories must fund efforts in at least one of the following 10 activities:

- Supporting the training and professional development of the child care workforce
- Improving on the development or implementation of early learning and developmental guidelines
- Developing, implementing, or enhancing a tiered quality rating and improvement system for child care providers and services
- Improving the supply and quality of child care programs and services for infants and toddlers
- Establishing or expanding a statewide system of child care resource and referral services
- Supporting compliance with state/territory requirements for licensing, inspection, monitoring, training, and health and safety (as described in section 5)
- Evaluating the quality of child care programs in the state/territory, including evaluating how programs positively impact children
- Supporting providers in the voluntary pursuit of accreditation
- Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development
- Performing other activities to improve the quality of child care services, as long as outcome measures relating to improved provider preparedness, child safety, child well-being, or kindergarten entry are possible.

Throughout this Plan, states and territories will describe the types of quality improvement activities where CCDF investments are being made, including but not limited to, quality set-aside funds and will describe the measurable indicators of progress used to evaluate state/territory progress in improving the quality of child care services for each expenditure (98.53(f)). **These activities can benefit infants and toddlers through school-age populations.**

This section covers the quality activities needs assessment, quality improvement activities and indicators of progress for each of the activities undertaken in the state or territory.

7.1 Quality Activities Needs Assessment for Child Care Services

- 7.1.1 **Lead Agencies must invest in quality activities based on an assessment of the state/territory's needs to carry out those activities. Lead Agencies have the flexibility to design an assessment of their quality activities that best meet their needs, including how often they do the assessment. Describe your state/territory assessment process, including the frequency of assessment (658G(a)(1); 98.53(a)). _____**

7.1.2 Describe the findings of the assessment and if any overarching goals for quality improvement were identified. _____

7.2 Use of Quality Funds

7.2.1 Check the quality improvement activities in which the state/territory is investing.

- ☒ Supporting the training and professional development of the child care workforce
If checked, respond to section 7.3 and indicate which funds will be used for this activity.
Check all that apply.
 - ☒ CCDF funds
 - ☐ Other funds. Describe:
- ☒ Developing, maintaining, or implementing early learning and developmental guidelines.
If checked, respond to section 6.3 and indicate which funds will be used for this activity.
Check all that apply.
 - ☒ CCDF funds
 - ☐ Other funds. Describe:
- ☒ Developing, implementing, or enhancing a tiered quality rating and improvement system. If checked, respond to 7.4 and indicate which funds will be used for this activity.
Check all that apply.
 - ☒ CCDF funds
 - ☐ Other funds. Describe:
- ☒ Improving the supply and quality of child care services for infants and toddlers. If checked, respond to 7.5 and indicate which funds will be used for this activity. Check all that apply.
 - ☒ CCDF funds
 - ☐ Other funds. Describe:
- ☒ Establishing or expanding a statewide system of CCR&R services, as discussed in 1.7. If checked, respond to 7.6 and indicate which funds will be used for this activity. Check all that apply.
 - ☒ CCDF funds
 - ☐ Other funds. Describe:
- ☒ Facilitating compliance with state/territory requirements for inspection, monitoring, training, and health and safety standards (as described in section 5). If checked, respond to 7.7 and indicate which funds will be used for this activity. Check all that apply.
 - ☒ CCDF funds
 - ☐ Other funds. Describe:

- ☒ Evaluating and assessing the quality and effectiveness of child care services within the state/territory. If checked, respond to 7.8 and indicate which funds will be used for this activity. Check all that apply.

☒ CCDF funds

☐ Other funds. Describe:

- ☒ Supporting accreditation. If checked, respond to 7.9 and indicate which funds will be used for this activity. Check all that apply.

☒ CCDF funds

☐ Other funds. Describe:

- ☒ Supporting state/territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development. If checked, respond to 7.10 and indicate which funds will be used for this activity. Check all that apply.

☒ CCDF funds

☐ Other funds. Describe:

- ☒ Other activities determined by the state/territory to improve the quality of child care services and which measurement of outcomes related to improved provider preparedness, child safety, child well-being, or kindergarten entry is possible. If checked, respond to 7.11 and indicate which funds will be used for this activity. Check all that apply.

☒ CCDF funds

☐ Other funds. Describe:

7.3 Supporting Training and Professional Development of the Child Care Workforce with CCDF Quality Funds

Lead Agencies can invest in the training, professional development, and post-secondary education of the child care workforce as part of a progression of professional development activities, such as those included at 98.44 in addition to the following (98.53(a)(1)).

7.3.1 Describe how the state/territory funds the training and professional development of the child care workforce.

- a) Check and describe which content is included in training and professional development activities and describe who or how an entity is funded to address this topic. Check all that apply.

☒ Promoting the social, emotional, physical, and cognitive development of children, including those efforts related to nutrition and physical activity, using scientifically based, developmentally appropriate, and age-appropriate strategies. Describe:

IdahoSTARS Essential Training and the technical assistance/coaching that supports the Essential Training's curriculum focuses on promoting the social, emotional, physical, and cognitive development of children, including those related to nutrition and physical activity using scientifically-based, developmentally appropriate and age-appropriate strategies. The Essential Training is a component of Idaho's QRIS, Steps to Quality, and developed as a series of training that builds upon foundational information incrementally through the various levels.

- ☒ Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social-emotional development and early childhood mental health and that reduce challenging behaviors, including a reduction in expulsions of preschool-age children from birth to age five for such behaviors. (See also section 2.5.) Describe: **Addressing Challenging Behaviors is an online, evidence-based training series consisting of 4 separate 2 hour training modules to be completed in sequential order. Child care providers watch the video vignettes and complete the corresponding quiz. Coaching/mentoring offered from CCR&R consultants support the Challenging Behaviors training content through coaching visits intended to assist classroom staff with embedding practices that include reflection on staff interactions, classroom environments, schedules, and transitions. IdahoSTARS Essential Training includes curriculum with content that focuses on the implementation of behavior management strategies. The strategies include positive behavior interventions and support models, promotes positive social-emotional development and early childhood mental health, with a focus on reducing challenging behaviors and expulsion from child care programs. The Essential Training is a component of Idaho's QRIS Steps to Quality, and has been developed as a series of training that builds upon foundational information in incremental stages. CCR&R consultants offer onsite visits utilizing a coaching approach that supports classroom teachers/care providers to increase knowledge and understanding of challenging behaviors and classroom strategies to decrease frustration and increase confidence and strengthen the overall classroom experiences.**
- ☒ Engaging parents and families in culturally and linguistically appropriate ways to expand their knowledge, skills, and capacity to become meaningful partners in supporting their children's positive development. Describe: **IdahoSTARS has embraced the Strengthening Families (SF) framework and in partnership with Idaho AEYC, IdahoSTARS offers training and TA opportunities for all child care programs interested in embedding SF. Idaho's QRIS, Steps to Quality, has embedded SF as a standard with Essential Training at each step that supports this standard. The Strengthening Families framework is focused on engaging parents and families in culturally and linguistically appropriate ways, assists child care**

programs and staff to embrace families to become meaningful partners who support their children's growth and development in positive ways.

- ☒ Implementing developmentally appropriate, culturally and linguistically responsive instruction, and evidence-based curricula and designing learning environments that are aligned with state/territory early learning and developmental standards. Describe: **Idaho's Early Learning eGuidelines are embedded in all IdahoSTARS approved training. Criteria for training approval requires all training be developmentally appropriate and utilize evidence-based curricula that is responsive to diverse cultures and languages. Additionally, Essential Training, ET4: Dual Language Learners, has content focused on culturally and linguistically responsive instruction and evidence-based practices. Essential training is also translated and accessible for Spanish-speaking child care providers. Interpreters are utilized for training presentations when child care providers attending speak languages other than English and Spanish.**
- ☒ Providing onsite or accessible comprehensive services for children and developing community partnerships that promote families' access to services that support their children's learning and development. Describe: **The parent pages on the IdahoSTARS website are focused on sharing information with parents that explain best practices in child care and includes a focus on safe sleep and emergency preparedness. The parent pages highlight what is meant by inclusive child care, and offers information on developmental screening. Parents can access information on professional development requirements for child care providers participating in the Idaho Child Care Program, offers information on choosing quality child care, access to the online referral process and to the CCR&R Resource Specialists, the local child care specialists available to assist families with finding child care.**
- ☒ Using data to guide program evaluation to ensure continuous improvement. Describe: **IdahoSTARS QRIS, Steps to Quality (STQ), has embedded Inclusion of All Children as one of the standards. As with all standards in STQ, it offers child care providers a pathway to increase awareness, gain knowledge and develop skills and strategies that will be put into practice with the children in their care. The standard, Inclusion of All Children, offers Essential Training plus coaching/technical assistance with indicators such as developing an Inclusion Statement as part of the program's policy and procedures; strengthening confidentiality as an ongoing practice, utilize Inclusion Readiness Checklists, observation skills and assessment tools; recognition and understanding of the importance of embracing a partnership with parents/families; as well as helping programs and staff to become more informed about IDEA, IEPs and IFSPs, and developing individual goals for all children. Essential Trainings also assist child care provides with making evidence-based decisions in regard to children with developmental delays and disabilities who are enrolled or are seeking enrollment to their programs.**
- ☐ Caring for children of families in geographic areas with significant concentrations of poverty and unemployment. Describe: _____
- ☒ Caring for and supporting the development of children with disabilities and developmental delays. Describe: **IdahoSTARS QRIS, Steps to Quality (STQ), has embedded Inclusion of All Children as one of the standards. As with all standards**

in STQ, it offers child care providers a pathway to increase awareness, gain knowledge and develop skills and strategies that will be put into practice with the children in their care. The standard, Inclusion of All Children, offers Essential Training plus coaching/technical assistance with indicators such as developing an Inclusion Statement as part of the program's policy and procedures; strengthening confidentiality as an ongoing practice, utilize Inclusion Readiness Checklists, observation skills and assessment tools; recognition and understanding of the importance of embracing a partnership with parents/families; as well as helping programs and staff to become more informed about IDEA, IEPs and IFSPs, and developing individual goals for all children. Essential Trainings also assist child care providers with making evidence-based decisions in regard to children with developmental delays and disabilities who are enrolled or are seeking enrollment to their programs.

- ☒ Supporting the positive development of school-age children. Describe: Afterschool child care program staff are included and welcome to participate in IdahoSTARS professional development opportunities. Programs such as YMCA, Boys and Girls Clubs, school based, faith-based, and privately owned after-school programs and their staff participate in the professional development system by accessing training, utilizing the training database and individual training logs to document completed training, and also to receive incentives for completing the annual training and/or education requirements. IdahoSTARS is working closely with the Idaho Out of School Network to identify and offer requested training and to work in partnership on a QRIS that is most appropriate for school-age and out of school time child care programs.
- ☐ Other. Describe:

b) Check how the state/territory connects child care providers with available federal and state/territory financial aid or other resources to pursue post-secondary education relevant for the early childhood and school-age workforce. Check all that apply.

- ☒ Coaches, mentors, consultants, or other specialists available to support access to post-secondary training, including financial aid and academic counseling
- ☒ Statewide or territory-wide, coordinated, and easily accessible clearinghouse (i.e., an online calendar, a listing of opportunities) of relevant post-secondary education opportunities
- ☒ Financial awards, such as scholarships, grants, loans, or reimbursement for expenses, from the state/territory to complete post-secondary education
- ☐ Other. Describe:

7.3.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures. Post-secondary education is promoted in IdahoSTARS in three different ways: (1) Offer Academic Scholarships for providers to receive an Early Childhood Education degree within the state of Idaho. Academic Scholarships promote Early Childhood Education, degree achievement and retention in the Early Childhood field. (2) Offer a one-course Academic Scholarship for providers to take a college course in Early Childhood, a related field or to help further their education to otherwise improve professional practice. (3)

The IdahoSTARS Professional Development System Registry tracks the education level of individuals and recognizes progress along an education pathway. Individuals may be eligible for monetary awards when a new education level is achieved and/or if they complete a course in ECE or a related field as on-going professional development. (4) Environment Rating Scale assessments are conducted on 50% of classrooms chosen randomly across age groups represented in a center setting. Home-based child care programs are assessed using the FCCERS-R. Assessments are conducted as programs verify and confirm Steps 2-5. Step 2 requires participation in the process; in Steps 3-5 programs meet graduated requirements for overall scores and interaction subscale scores. Data is collected in the ERS Data System (Branagh Information Group).

7.4 Quality Rating and Improvement System (QRIS)

Lead Agencies may respond in this section based on other systems of quality improvement, even if not called a QRIS, as long as the other quality improvement system contains the elements of a QRIS. QRIS refers to a systematic framework for evaluating, improving, and communicating the level of quality in early childhood programs and contains five key elements:

1. Program standards
2. Supports to programs to improve quality
3. Financial incentives and supports
4. Quality assurance and monitoring
5. Outreach and consumer education

7.4.1 Does your state/territory have a quality rating and improvement system or other system of quality improvement?

- ☐ No, but the state/territory is in the QRIS development phase. If no, skip to 7.5.1.
- ☐ No, the state/territory has no plans for QRIS development. If no, skip to 7.5.1.
- ☒ Yes, the state/territory has a QRIS operating statewide or territory-wide. Describe how the QRIS is administered (e.g., statewide or locally or through CCR&R entities) and any partners and provide a link, if available. **Steps to Quality, Idaho's QRIS, is administered through a partnership between University of Idaho (UI) Center on Disabilities and Human Development (CDHD) and Idaho Association for the Education of Young Children (Idaho AEYC). Together, UI and Idaho AEYC deliver technical assistance and coaching through regional Child Care Resource and Referral staff, develop training curriculum, manage the training/trainer registry, the Professional Development System registry, training and academic scholarships, Environment Rating Scale assessments, state licensing, subsidy eligibility for child care providers, QRIS Steps to Quality grant management, Steps to Quality placement and recognition, and the Child Care Health Consultant program. The Steps to Quality program is supported by and utilizes information and data from all IdahoSTARS programs.**
<https://idahostars.org/Child-Care-Providers/Steps-to-Quality>

- ☐ Yes, the state/territory has a QRIS initiative operating as a pilot-test in a few localities or only a few levels but does not have a fully operating initiative on a statewide or territory-wide basis. Provide a link, if available.
- ☐ **Yes, the state/territory has another system of quality improvement.**
If the response is yes to any of the above, describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.

7.4.2 QRIS participation.

- a) Are providers required to participate in the QRIS?
- ☒ Participation is voluntary.
 - ☐ Participation is mandatory for providers serving children receiving a subsidy. If checked, describe the relationship between QRIS participation and subsidy (e.g., minimum rating required, reimbursed at higher rates for achieving higher ratings, participation at any level). _____
 - ☐ Participation is required for all providers.
- b) Which types of settings or distinctive approaches to early childhood education and care participate in the state/territory's QRIS? Check all that apply.
- ☒ Licensed child care centers
 - ☒ Licensed family child care homes
 - ☐ License-exempt providers
 - ☐ Early Head Start programs
 - ☒ Head Start programs (**that offer an extended day (wrap-around child care)**)
 - ☐ State prekindergarten or preschool programs
 - ☐ Local district-supported prekindergarten programs
 - ☒ Programs serving infants and toddlers
 - ☒ Programs serving school-age children
 - ☒ Faith-based settings
 - ☐ Tribally operated programs
 - ☐ Other. Describe: _____

7.4.3 Support and assess the quality of child care providers.

The Lead Agency may invest in the development, implementation, or enhancement of a tiered quality rating and improvement system for child care providers and services. *Note:* If a Lead Agency decides to invest CCDF quality dollars in a QRIS, that agency can use the funding to assist in meeting consumer education requirements (98.33). If the Lead Agency has a QRIS, respond to questions 7.4.3 through 7.4.6.

Do the state/territory's quality improvement standards align with or have reciprocity with any of the following standards?

- ☐ No
- ☒ Yes. If yes, check the type of alignment, if any, between the state/territory's quality standards and other standards. Check all that apply.
 - ☐ Programs that meet state/territory preK standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, there is a reciprocal agreement between preK programs and the quality improvement system).
 - ☒ Programs that meet federal Head Start Program Performance Standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, there is a reciprocal agreement between Head Start programs and the quality improvement system).
 - ☒ Programs that meet national accreditation standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, an alternative pathway exists to meeting the standards).
 - ☐ Programs that meet all or part of state/territory school-age quality standards.
 - ☐ Other. Describe: _____
 - ☐ None.

7.4.4 Do the state/territory's quality standards build on its licensing requirements and other regulatory requirements?

- ☐ No
- ☒ Yes. If yes, check any links between the state/territory's quality standards and licensing requirements.
 - ☒ Requires that a provider meet basic licensing requirements to qualify for the base level of the QRIS.
 - ☒ Embeds licensing into the QRIS.
 - ☐ State/territory license is a "rated" license.
 - ☐ Other. Describe: _____
 - ☐ Not linked.

7.4.5 Does the state/territory provide financial incentives and other supports designed to expand the full diversity of child care options and help child care providers improve the quality of services that are provided through the QRIS.

- ☐ No
- ☒ Yes. If yes, check all that apply.
 - ☐ One time grants, awards, or bonuses
 - ☒ Ongoing or periodic quality stipends
 - ☐ Higher subsidy payments

- ☒ Training or technical assistance related to QRIS
- ☒ Coaching/mentoring
- ☒ Scholarships, bonuses, or increased compensation for degrees/certificates
- ☐ Materials and supplies **(incorporated into grants)**
- ☐ Priority access for other grants or programs **(incorporated into grants/awards)**
- ☐ Tax credits (providers or parents)
- ☐ Payment of fees (e.g., licensing, accreditation) **(incorporated into grants/awards)**
- ☐ Other:
- ☐ None

7.4.6 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures. **Measurable progress includes increased numbers of programs enrolled in Steps to Quality and an increase in the number of programs moving through steps 1-6. IdahoSTARS has seen an increase in programs participating, verified at higher steps and receiving Environment Rating Scale assessments. IdahoSTARS is developing measures to track training, technical assistance, coaching and other services using seven domains of child development. A more robust reporting system will increase our capacity to make data-driven decisions and report results.**

7.5 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers

Lead Agencies are encouraged to use the needs assessment to systematically review and improve the overall quality of care that infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers, the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care, **including any partnerships or coordination with Early Head Start and IDEA Part C programs.**

Lead Agencies are required to spend 3 percent of their total CCDF expenditures on activities to improve the supply and quality of their infant and toddler care. **This is in addition to the general quality set-aside requirement.**

7.5.1 What activities are being implemented by the state/territory to improve the supply (see also section 4) and quality of child care programs and services for infants and toddlers? Check all that apply and describe.

- ☐ Establishing or expanding high-quality community- or neighborhood-based family and child development centers. These centers can serve as resources to child care providers to improve the quality of early childhood services for infants and toddlers from low-income families and to improve eligible child care providers' capacity to offer high-quality, age-appropriate care to infants and toddlers from low-income families.
Describe: _____
- ☐ Establishing or expanding the operation of community- or neighborhood-based family child care networks. Describe: _____

- ☐ Providing training and professional development to enhance child care providers' ability to provide developmentally appropriate services for infants and toddlers. Describe: _____
- ☒ Providing coaching, mentoring, and/or technical assistance on this age group's unique needs from statewide or territory-wide networks of qualified infant-toddler specialists. Describe: **Infant and Toddler Specialization includes 30 hours of evidence based training and ongoing coaching support. Each participating provider works in partnership with her (his) coach to identify their individual focus areas. Additionally, the Infant Toddler Environment Rating Scale (ITERS) is used as a pre-assessment, and post-assessment upon completion of training and coaching (approx. 18 months to 2-year commitment) with an annual ITERS assessment in following years up to 5 additional years.**
- ☒ Coordinating with early intervention specialists who provide services for infants and toddlers with disabilities under Part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.). Describe: **Collaboration with early intervention specialists is recognized within the state QRIS at Step 5. For programs actively engaged in development and implementation of Individualized Family Service Plans, those plans are accepted as an alternative to required Child Inclusion Plans. In addition, Early Intervention providers are encouraged to contact their local CCRC for collaboration and partnership with identified child care programs.**
- ☐ Developing infant and toddler components within the state/territory's QRIS, including classroom inventories and assessments. Describe: _____
- ☐ Developing infant and toddler components within the state/territory's child care licensing regulations. Describe: _____
- ☒ Developing infant and toddler components within the early learning and developmental guidelines. Describe: **IdahoSTARS utilizes the Idaho Early Learning eGuidelines in training, technical assistance and coaching supports related to high quality infant and toddler care and education. The Idaho Early Learning eGuidelines span ages birth to eight years of age. Developmental guidelines and caregiver strategies for supporting the development of infants and toddlers are included within each domain.**
- ☐ Improving the ability of parents to access transparent and easy-to-understand consumer information about high-quality infant and toddler care that includes information on infant and toddler language, social-emotional, and both early literacy and numeracy cognitive development. Describe: _____
- ☐ Carrying out other activities determined by the state/territory to improve the quality of infant and toddler care provided within the state/territory and for which there is evidence that the activities will lead to improved infant and toddler health and safety, cognitive and physical development, and/or well-being. Describe: _____
- ☐ Coordinating with child care health consultants. Describe: _____
- ☐ Coordinating with mental health consultants. Describe: _____
- ☐ Other. Describe: _____

- 7.5.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services for infants and toddlers within the state/territory and the data on the extent to which the state or territory has met these measures. The Infant Toddler Environment Rating Scale (ITERS) is used as a pre-assessment, and post-assessment upon completion of training and coaching (approx. 18 months to 2-year commitment) with an annual ITERS assessment in following years up to 5 additional years. The Infant Toddler Specialization also includes a Pre and Post knowledge acquisition test as well as evaluation measures throughout the 5-year specialization process to determine a change in practice.

7.6 Child Care Resource and Referral

A Lead Agency may expend funds to establish or expand a statewide system of child care resource and referral services (98.53(a)(5)). It can be coordinated, to the extent determined appropriate by the Lead Agency, by a statewide public or private non-profit, community-based, or regionally based lead child care resource and referral organization (658E(c)(3)(B)(iii)). This effort may include activities done by local or regional child care and resource referral agencies, as discussed in section 1.7.

- 7.6.1 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures. IdahoSTARS will utilize a 3 year work plan, linked to the logic model, to evaluate progress on measurable objectives toward meeting identified goals on an annual basis. The IdahoSTARS work plan is under development, and will include the four core functions of the IdahoSTARS program: Outreach, Professional Development; Continuous Quality Improvement, and Program and Family Supports. Each core function will identify measurable indicators of progress; for example, increase the number of providers completing the renewal process in a timely manner because we revised and simplified the process and made it more user-friendly. We will increase the number of families finding child care after receiving a referral. IdahoSTARS is monitored on a twice yearly schedule to ensure compliance with their contract. Contract requirements include demonstration of a specified increase in provider attainment of Child Development Associate (CDA) credential and/or educational advancement supported through incentives.

7.7 Facilitating Compliance with State Standards

- 7.7.1 What strategies does your state/territory fund with CCDF quality funds to facilitate child care providers' compliance with state/territory requirements for inspection, monitoring, training, and health and safety and with state/territory licensing standards? Describe: Idaho has a statewide contract with the Health Districts, funded by quality set-aside funds, to ensure provider compliance with inspections, monitoring, training and complaints of health and safety matters. The Health Districts conduct all pre-service and annual inspections (and trainings for in-home providers). Additionally the Health Districts inspect facilities based on complaints related to health and safety violations, and at the request of the Idaho Child Care Program Specialist or at the request of the Idaho State Daycare Licensing Specialist. Ongoing support for programs to better understand or implement best practices in health and safety is

available through a referral from the Health District to the IdahoSTARS Child Care Health Consultants. The Vendor Specialists at IdahoSTARS maintain all necessary documentation and determine provider eligibility for CCDF payment or daycare licensing. They gather and maintain all required provider information and verifications; such as Fire Inspections, Health and Safety Inspections (or trainings), CPR and First Aid completion certificates, training logs, insurance, and renewed Provider Agreements. Reminder letters are mailed to providers at 90 days and 30 days prior to the expiration date of their current health and safety and/or training requirements. Providers are contacted at minimum, twice each year to confirm and update their information in the database. During this contact, providers receive information on new requirements or changes to existing requirements, highlighting health and safety issue, which include reminders of pediatric CPR and pediatric First Aid certification dates, emergency preparedness, safe sleep practices, and annual training.

7.7.2 Does the state/territory provide financial assistance to support child care providers in complying with minimum health and safety requirements?

- ☐ No
- ☒ Yes. If yes, which types of providers can access this financial assistance?
 - ☐ Licensed CCDF providers
 - ☐ Licensed non-CCDF providers
 - ☐ License-exempt CCDF providers
 - ☒ Other. Describe: **Start-up grants are available to newly enrolled family and group child care providers to the Idaho Child Care Program. The grant is a reimbursement grant that may cover such expenses as background checks for the provider and any family members required to complete background checks, and/or items needed to pass a health and safety inspection such as a refrigerator thermometer, or a fire extinguisher.**

7.7.3 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures. The Start-up grant is intended to assist new family-based child care providers with financial costs associated with beginning a new business. Our goal is to increase longevity of programs which in turn, supports continuity of care for children. Data will be used to demonstrate whether programs that have received the Start-up grant stay in business over time. We'll track referrals to the Child Care Health Consulting program and ongoing CCR&R support to show whether these programs engage with coaching and technical assistance services for implementation of health and safety requirements. Finally, utilize health inspection data to show whether these grant funded programs pass health inspections each year without having failed attempts.

7.8 Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services

7.8.1 Describe how the state/territory measures the quality and effectiveness of child care programs and services in both child care centers and family child care homes currently being offered, including any tools used to measure child, family, teacher, classroom, or provider improvements, and how the state/territory evaluates how those tools positively impact

children. Children who are being cared for in Idaho's QRIS, Steps to Quality star rated facilities or facilities enrolled to obtain a star rating are considered being cared for in high quality care. Steps to Quality, measures the quality of child care programs using quality indicators, including specific measures such as a Safe Sleep Checklist, Food/Nutrition/Active Physical Play Checklist, Strengthening Families self-assessment, Program Administration Scale (PAS)/Business Administration Scale (BAS) self-assessment, Inclusion Readiness Checklist, Child Inclusion Plans, and Child Growth, Development and Learning self-assessment. Classroom improvements are tracked through the ongoing use of Environment Rating Scale Assessments. Teacher education and training is consistently monitored through the Professional Development Registry. IdahoSTARS and DHW track program quality through the number of programs at each QRIS level. DHW and ICCP use a data dashboard, and quarterly reports to consistently monitor the amount of children utilizing ICCP benefits that are attending high quality child care facilities. All staff work to increase the number of subsidy children in high quality care through subsidy access, policy development, provider support, and the ongoing enrollment of child care providers in Steps to Quality. Idaho tracks and reports, in the annual Quality Performance Report, the percentage of ICCP children attending high quality programs. We have had an increase in children attending high quality care for the past two years.

- 7.8.2 Describe the measureable indicators of progress relevant to this use of funds that the State/Territory will use to evaluate its progress in improving the quality of child care programs and services in child care centers and family child care homes within the state/territory and the data on the extent to which the state or territory has met these measures. Classroom improvements are tracked by trending increased Environment Rating Scale Assessment scores. Teacher education and training is tracked by trending increased Professional Development Registry levels, participation rates, and awards. Program quality is tracked through trending increased and/or sustained Steps to Quality level placement.

7.9 Accreditation Support

- 7.9.1 Does the state/territory support child care providers in the voluntary pursuit of accreditation by a national accrediting body with demonstrated, valid, and reliable program standards of high quality?
- ☒ Yes, the state/territory has supports operating statewide or territory-wide for both child care centers and family child care homes. Describe the support efforts for all types of accreditation that the state/territory provides to child care centers and family child care homes to achieve accreditation. Technical assistance is available for programs enrolled in Steps to Quality. Improvement grants, financial incentives, and recognition of accredited programs at the highest levels of Steps to Quality facilitate movement toward accreditation. Additionally, IdahoSTARS assists programs toward achieving accreditation through such accrediting organizations as National Association for the Education of Young Children and National Association for Family Child Care. Programs are not required to participate in Steps to Quality to apply for an Accreditation Mini-Grant; however, program staff applying for Accreditation Mini-Grants, are required to be a part of the IdahoSTARS Professional Development Registry. Mini Grants that support accreditation are awarded in the spring and are based on available funding. Funds may be used toward applying for accreditation, maintaining accreditation fees

or program support to enhance quality based on recommendations of accrediting body..

- ☐ Yes, the state/territory has supports operating statewide or territory-wide for child care centers only. Describe the support efforts for all types of accreditation that the state/territory provides to child care centers. Describe:
- ☐ Yes, the state/territory has supports operating statewide or territory-wide for family child care homes only. Describe the support efforts for all types of accreditation that the state/territory provides to family child care. Describe:
- ☐ Yes, the state/territory has supports operating as a pilot-test or in a few localities but not statewide or territory-wide.
 - ☐ Focused on child care centers. Describe:
 - ☐ Focused on family child care homes. Describe:
- ☐ No, but the state/territory is in the accreditation development phase.
 - ☐ Focused on child care centers. Describe:
 - ☐ Focused on family child care homes. Describe:
- ☐ No, the state/territory has no plans for accreditation development.

7.9.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures. Progress is measured by an increase in the number of programs recognized at the highest level of QRIS (which can be achieved through accreditation), and the number of programs that identify accreditation as a goal on the Steps to Quality- Quality Improvement Plan. The success of the Accreditation Mini-Grants is measured by the number of programs that maintain or achieve accreditation after the receipt of the grant funds.

7.10 Program Standards

7.10.1 Describe how the state/territory supports state/territory or local efforts to develop or adopt high-quality program standards, including standards for infants and toddlers, preschoolers, and/or school-age children

Health. Describe the supports: The IdahoSTARS Child Care Health Consultant Program has a team of Child Care Health Consultants that provide onsite coaching and technical assistance to child care programs across the state of Idaho to support implementation of the national health and safety performance standards for early care and education programs. Health specific indicators are also embedded within each step of the State QRIS.

Mental health. Describe the supports: The IdahoSTARS Child Care Health Consultant team includes a licensed counselor that provides guidance and support to child care providers and staff members on implementation of mental health practices within the child care setting.

Nutrition. Describe the supports: The IdahoSTARS Child Care Health Consultant team includes a Registered Dietician that provides guidance and support to child care providers and staff members on implementation of nutrition practices within the child care setting.

Physical activity. Describe the supports: Indicators for physical activity are included within the statewide QRIS. In addition, multiple trainings and technical assistance packages are available through IdahoSTARS to support implementation of physical activity practices.

Physical development. Describe the supports: Training, targeted technical assistance and

coaching supports are available through IdahoSTARS to support increased knowledge of children's physical development, and practices that support physical development. Relevant trainings are aligned with the Idaho Early Learning eGuidelines, specifically the Physical Health, Well-Being and Motor Development domain.

7.10.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures. Child Care Health Consultants (CCHC) track the focus of their work with child care providers, the number of referrals received, the number of individual times a CCHC completes a site visit to provide onsite coaching or technical assistance, and the amount of time spent. IdahoSTARS uses data such as decrease of complaints related to health and safety, decrease the number of failed health and safety inspections; increase in referrals for CCHC services. When data is evaluated, the intention is to see the above statements to be true.

7.11 Early Learning and Development Guidelines and Other Quality Improvement Activities

7.11.1 If quality funds are used to develop, maintain, or implement early learning and development guidelines, describe the measureable indicators that will be used to evaluate the state/territory's progress in improving the quality of child care programs and services and the data on the extent to which the state/territory has met these measures (98.53(f)(3)). _____

7.11.2 List and describe any other activities that the state/territory provides to improve the quality of child care services for infants and toddlers, preschool-aged, and school-aged children, which may include consumer and provider education activities, and also describe the measureable indicators of progress for each activity relevant to this use of funds that the state/territory will use to evaluate its progress in improving provider preparedness, child safety, child well-being, or kindergarten entry and the data on the extent to which the state or territory has met these measures. Describe: _____

8 Ensure Grantee Program Integrity and Accountability

Program integrity and accountability activities are integral to the effective administration of the CCDF program. Lead Agencies are required to describe in their Plan effective internal controls that ensure integrity and accountability while maintaining the continuity of services (98.16(cc)). These accountability measures should address reducing fraud, waste, and abuse, including program violations and administrative errors.

This section includes topics on internal controls to ensure integrity and accountability and processes in place to investigate and recover fraudulent payments and to impose sanctions on clients or providers in response to fraud. Respondents should consider how fiscal controls, program integrity, and accountability apply to:

- Memorandums of understanding (MOUs) within the Lead Agency's various divisions that administer or carry out the various aspects of CCDF
- MOUs, grants, or contracts to other state agencies that administer or carry out various aspects of CCDF

- Grants or contracts to other organizations that administer or carry out various aspects of CCDF, such as professional development and family engagement activities
- Internal processes for conducting child care provider subsidy

8.1 Internal Controls and Accountability Measures to Help Ensure Program Integrity

8.1.1 Check and describe how the Lead Agency ensures that all its staff members and any staff members in other agencies who administer the CCDF program through MOUs, grants and contracts are informed and trained regarding program requirements and integrity. Check all that apply:

- ☐ Train on policy manual. Describe: _____
- ☐ Train on policy change notices. Describe: _____
- ☒ Ongoing monitoring and assessment of policy implementation. Describe: **Division of Welfare Benefit Programs Contract Monitoring Standards Overview** This document defines the process used by Division of Welfare's Contracts and External Resource Management (CERM) Team to ensure that the standards, techniques, and criteria are consistent and timely. This document attempts to define actions to be taken and the decisions to be made during the monitoring process and clear communication process to all stakeholders. Objectives An effective monitor will provide information to the contract manager (also known as the business lead) on the contractor's performance, the effectiveness of the contract, and the quality of the service being delivered. It will also inform the contractor as to their success in meeting the objectives of the contract, alert them to possible performance improvement, identify best practices, and possible corrective action needed as a result of the monitor. Prepare for the Monitoring In order to prepare for the monitoring, the CERM Team: Reviews for accuracy or creates a monitoring tool that aligns with the scope of work and performance metrics of the contract to be monitored. Schedules the monitor. Informs the contractor of the schedule and what will be monitored. (facility, documents, etc.) Shares the schedule with the contract manager. Makes a random selection of records /documents if applicable. Conduct the Monitoring The CERM Team conducts the monitoring on or off site. The monitor team must determine the following: Did the contractor meet performance requirements? Did the contractor perform the services defined in the contract? Did the contractor perform the services on time? Were the deliverables (reports, services, surveys, software, products, and outcomes) delivered or achieved on time and in the required format? Did the services meet the Department's expected (and defined) standard? Were the services billed on the invoice actually delivered? Did the contractor comply with the rules, regulations, and policies as outlined by the Department? Analyze Potential Findings with the Contract Manager If any of these items were found deficient, the monitor team meets with the contract manager to discuss possible adverse conditions and determine the severity of each. Developing and organizing deficiencies is critical to the process. It will assist in determining

whether all pertinent information was obtained during the monitor and facilitate discussions and decisions related to the potential findings. Each finding will be supported with specific examples and concrete details. The following steps should be utilized in order to identify possible adverse conditions, their severity, and communicate that to the contract manager. Compare the Condition with the Criteria Most findings originate with comparisons of "what is" (the condition) with "what should be" (the criteria). Criteria are the standard for measuring performance or the goals to be achieved. Examples of criteria include laws, regulations, policies, procedures, management principles, good business practices, contract scope of work, accurate and complete case files, system updates, and performance standards. For example: If voucher payments are found to have no supporting documentation to support their use (condition) and our criteria (scope of work) require that all vouchers are supported by documentation to verify the voucher use and purpose, the condition does not support the criteria. Another example may be that case management charges are being processed for cases (condition) but no documentation is found in the case to support the expense (criteria) as outlined in the scope of work, the condition does not support the criteria. Final example, the agency does not have written procedures in place to refer clients to Child Support Services (condition) as required by Federal Regulations (criteria). Determine the Severity of a Deficiency The adverse conditions should be identified, discussed, and documented in terms of the following attributes: Cause: Cause describes how or why the condition came about and is the reason for the difference between what is and what should be (why the condition happened). It is very important that each finding include an attempt to identify the underlying root causes of the conditions reported. Establishing cause and effect relationships is often the most difficult part the monitoring process, but is essential in order to identify the basic weakness that allowed a deviation to occur and to design a constructive recommendation. For example, the team may determine the cause relates to: Lack of procedures or management controls. Failure to follow established procedures or controls. Misinterpretation of established procedures or controls. Fraud, abuse or neglect. Effect. Effect tells what resulted from the condition, or the associated risk and its significance. It is important to identify the effect even though it might be difficult to identify the underlying root causes of the conditions identified. The teams must demonstrate whether an adverse condition found is an isolated example or widespread and the rate or frequency of occurrence. The attention that a finding gets depends largely on its significance, as judged by effect. Where possible, the effect should be expressed in quantitative terms (dollars, units of production, resources, etc.) Examples include unnecessary expenditures, inefficiencies because of duplication of effort, costs associated loss of goods or inventory, violation of federal regulations resulting in a penalties, and improper use of funds. If the actual effect cannot be determined, comments should be made on the potential effect. When a difference is identified between the condition and the criteria and the severity of the deficiency is determined, the next step is to identify if the result is a finding,

serious concern or warrants a comment/recommendation: A Finding is a serious performance or process error that is in violation of the contract or that puts the ability of the contractor to carry out the contract requirements at risk. Whether or not it is a finding depends on the cause and/or the effect. If the cause is such that its effect would be widespread and/or significant, then it is a finding. When there is a finding, the contractor is required to respond in some manner that will correct or prevent the finding from happening in the future.

Concern/Serious Concern is a less serious performance or process error that is not in violation of the contract. However, the error is a concern because its cause and effect could be widespread and/or significant for potential non-compliance. When there is a serious concern noted, the contractor is required to respond in some manner that will correct or prevent the error from happening in the future. FYI/comment/suggestion may be suggestions for improvement, compliments, or comments regarding best practices. The contractor is not required to respond and is not required to comply with the suggestion. Submit Initial Results Report The team submits the initial results of the monitoring to the contractor within ten business days of the monitor. If there are no deficiencies the process moves to Final Results. The contractor has ten business days to respond to any deficiencies with a clearance request. If there is no request, the process moves to Final Results. Remedy the Deficiencies Within ten days of receipt of contractor's response, the CERM Team collaborates with the contract manager to accomplish the following: Make decisions on any clearance requests made by contractor. Determine a remedy and/or penalty for any deficiency that still stands. Remedies include: Performance Improvement Plan Reimbursement Penalties include: Financial Corrective Action Termination of Contract Targeted monitoring may be performed as determined by the contract manager. If consensus is not reached on these decisions, the contract manager has the final decision. However, if the Bureau Chief over Compliance and Support believes the risk to contract standards is too high, the decision is escalated to the Welfare Administrator. Submit Final Results The monitor team will submit final results to contractor, contract manager, Division of Welfare Administrator, and Bureau Chief over Compliance and Support. If there were findings, the contractor will be given a date by which to submit reimbursement, performance improvement, or corrective action plan. If the submission is approved by the CERM Team, appropriate follow-up will be scheduled. If the submission is not approved, the CERM Team and contractor will negotiate a plan that sufficiently addresses the deficiency(ies) until a consensus is reached.

☐ Other. Describe:

- 8.1.2 Lead Agencies must ensure the integrity of the use of funds through sound fiscal management and must ensure that financial practices are in place (98.68 (a)(1)). Describe the processes in place for the Lead Agency to ensure sound fiscal management practices for all expenditures of CCDF funds. Check all that apply:

- ☒ Verifying and processing billing records to ensure timely payments to providers.
Describe: **Monthly Dependent Care forms are submitted by providers, outlining payment billed amounts, signed by parents and providers for which is submitted to the Department for payment. All providers, annually, sign a 'Provider Agreement' for child care which outlines the requirements for participating in the program including appropriate record keeping.**
- ☒ Fiscal oversight of grants and contracts. Describe: **All contracted entities submit monthly expenditures for which CERM reviews for accuracy and then submits to the fiscal department for processing, approval, and payment.**
- ☒ Tracking systems to ensure reasonable and allowable costs. Describe: **The Department of Health and Welfare, finance department, tracks expenditures to specific accounts and funding sources. Monthly reports are provided to divisions for review as well as quarterly budget meetings take place to review budgets. _____**
- ☐ Other. Describe: _____

8.1.3 Check and describe the processes that the Lead Agency will use to identify risk in their CCDF program. Check all that apply:

- ☐ Conduct a risk assessment of policies and procedures. Describe: _____
- ☐ Establish checks and balances to ensure program integrity. Describe: _____
- ☒ Use supervisory reviews to ensure accuracy in eligibility determination. Describe: **Our review process is set up to find any areas in which our performance is at risk, pinpoint the area (policy, process, or training) of concern, and quickly respond to the field needs either at the local level or roll out statewide based on the findings. For each processing center/field office reviewed, the case reviews incorporate initial contact with the Department through approval/denial as well as acting on changes. We review program access, integrity, system keying standards, and maintenance. Our reviews also include customer service standards and timeliness. Our review profile captures error causes and we have reports which help us to identify any error trends. Any errors discovered are sent for immediate correction. Errors are shared with the field Program Managers for individual performance management as well as used for identifying statewide trends. The Bureau Chiefs for Operations and Operations Design identify areas in which we can provide statewide training when necessary which supports our statewide business model.**
- ☐ Other. Describe: _____

8.1.4 Lead Agencies conduct a wide variety of activities to fight fraud and ensure program integrity.
Lead Agencies are required to have processes in place to identify fraud and other program violations to ensure program integrity. Program violations can include both intentional and unintentional client and/or provider violations, as defined by the Lead Agency. **These violations and errors, identified through the error-rate review process may result in payment or nonpayment (administrative) errors and may or may not be the result of fraud, based on the**

Lead Agency definition. Check and describe any activities that the Lead Agency conducts to ensure program integrity.

a) Check and describe all activities that the Lead Agency conducts to identify and prevent fraud or intentional program violations. Include in the description how each activity assists in the identification and prevention of fraud and intentional program violations. Include a description of the results of such activity.

- ☒ Share/match data from other programs (e.g., TANF program, Child and Adult Care Food Program, Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS)). Describe: **Department of Health and Welfare audit department does PARIS matches monthly.**
- ☐ Run system reports that flag errors (include types). Describe:
- ☐ Review enrollment documents and attendance or billing records. Describe:
- ☒ Conduct supervisory staff reviews or quality assurance reviews. Describe: **Our review process is set up to find any areas in which our performance is at risk, pinpoint the area (policy, process, or training) of concern, and quickly respond to the field needs either at the local level or roll out statewide based on the findings. For each processing center/field office reviewed, the case reviews incorporate initial contact with the Department through approval/denial as well as acting on changes. We review program access, integrity, system keying standards, and maintenance. Our reviews also include customer service standards and timeliness. Our review profile captures error causes and we have reports which help us to identify any error trends. Any errors discovered are sent for immediate correction. Errors are shared with the field Program Managers for individual performance management as well as used for identifying statewide trends. The Bureau Chiefs for Operations and Operations Design identify areas in which we can provide statewide training when necessary which supports our statewide business model.**
- ☒ Audit provider records. Describe:
- ☐ Train staff on policy and/or audits. Describe:
- ☐ Other. Describe:

b) Check and describe all activities the Lead Agency conducts to identify unintentional program violations. Include in the description how each activity assists in the identification and prevention of unintentional program violations. **Include a description of the results of such activity.**

- ☒ Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, PARIS). Describe: **Department of Health and Welfare audit department does PARIS matches monthly.**
- ☐ Run system reports that flag errors (include types). Describe: _____

- ☐ Review enrollment documents and attendance or billing records. Describe: _____
- ☒ Conduct supervisory staff reviews or quality assurance reviews. Describe: **Our review process is set up to find any areas in which our performance is at risk, pinpoint the area (policy, process, or training) of concern, and quickly respond to the field needs either at the local level or roll out statewide based on the findings. For each processing center/field office reviewed, the case reviews incorporate initial contact with the Department through approval/denial as well as acting on changes. We review program access, integrity, system keying standards, and maintenance. Our reviews also include customer service standards and timeliness. Our review profile captures error causes and we have reports which help us to identify any error trends. Any errors discovered are sent for immediate correction. Errors are shared with the field Program Managers for individual performance management as well as used for identifying statewide trends. The Bureau Chiefs for Operations and Operations Design identify areas in which we can provide statewide training when necessary which supports our statewide business model.**
- ☐ Audit provider records. Describe: _____
- ☐ Train staff on policy and/or audits. Describe: _____
- ☐ Other. Describe: _____

c) Check and describe all activities the Lead Agency conducts to identify and prevent agency errors. Include in the description how each activity assists in the identification and prevention of agency errors.

- ☐ Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, PARIS). Describe: _____
- ☒ Run system reports that flag errors (include types). Describe: **The Bureau Chief over operations monitors various reports on a daily, weekly and monthly basis. Program Managers are provided reports on their region to identify and review results and create training opportunities where areas of the business are needing additional assistance to meet targets.**
- ☐ Review enrollment documents and attendance or billing records. Describe: _____
- ☐ Conduct supervisory staff reviews or quality assurance reviews. Describe: _____
- ☐ Audit provider records. Describe: _____
- ☐ Train staff on policy and/or audits. Describe: _____
- ☐ Other. Describe: _____

8.1.5 The Lead Agency is required to identify and recover misspent funds as a result of fraud, and it has the option to recover any misspent funds as a result of errors.

- a) Check and describe all activities that the Lead Agency uses to investigate and recover improper payments due to fraud. Include in the description how each activity assists in the investigation and recovery of improper payment due to fraud or intentional program**

violations. Include a description of the results of such activity. Activities can include, but are not limited to, the following:

- ☒ Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount. Describe: **100 dollars**
- ☒ Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency). Describe: _____
- ☒ Recover through repayment plans. Describe: _____
- ☐ Reduce payments in subsequent months. Describe: _____
- ☒ Recover through state/territory tax intercepts. Describe: _____
- ☐ Recover through other means. Describe: _____
- ☒ Establish a unit to investigate and collect improper payments and describe the composition of the unit below. Describe: **The Idaho Department of Health and Welfare maintains a unit for Welfare Fraud Investigations. Trained investigators actively pursue allegations of program abuse by clients and child care providers. Once their findings are complete, the Revenue Operations Unit at Idaho Department of Health and Welfare actively pursues the collection of various outstanding monies owed to the Department. They pursue the recovery of program benefit overpayments whether stemming from intentional program violations (IPV's) on part of IDHW clientele or from simple human error. Revenue Operations diligently pursue the capture of any monies receivable as negotiated through a repayment agreement or as awarded through fair hearing and legal proceedings, and then systematically process the receipt and distribution of those funds to ensure that they are deposited into the appropriate financial accounts.**
- ☐ Other. Describe: _____

b) Check any activities that the Lead Agency will use to investigate and recover improper payments due to unintentional program violations. Include in the description how each activity assists in the investigation and recovery of improper payments due to unintentional program violations. Include a description of the results of such activity. Activities can include, but are not limited to, the following:

- ☒ Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount. Describe: **100 dollars**
- ☒ Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency). Describe: _____
- ☒ Recover through repayment plans. Describe: _____
- ☐ Reduce payments in subsequent months. Describe: _____
- ☐ Recover through state/territory tax intercepts. Describe: _____
- ☐ Recover through other means. Describe: _____
- ☒ Establish a unit to investigate and collect improper payments. Describe: **The Idaho Department of Health and Welfare maintains a unit for Welfare Fraud Investigations. Trained investigators actively pursue allegations of program abuse**

by clients and child care providers. Once their findings are complete, the Revenue Operations Unit at Idaho Department of Health and Welfare actively pursues the collection of various outstanding monies owed to the Department. They pursue the recovery of program benefit overpayments whether stemming from intentional program violations (IPV's) on part of IDHW clientele or from simple human error. Revenue Operations diligently pursue the capture of any monies receivable as negotiated through a repayment agreement or as awarded through fair hearing and legal proceedings, and then systematically process the receipt and distribution of those funds to ensure that they are deposited into the appropriate financial accounts. _____

☐ Other. Describe: _____

c) Check and describe all activities that the Lead Agency will use to investigate and recover improper payments due to agency errors. Include in the description how each activity assists in the investigation and recovery of improper payments due to administrative errors. **Include a description of the results of such activity.**

☒ Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount. Describe: **100 dollars**

☒ Coordinate with and refer to the other state/territory agency(ies) (e.g., state/territory collection agency, law enforcement agency). Describe: _____

☒ Recover through repayment plans. Describe: **Financial services works to establish repayment plans with identified families or providers. A process for payment is established and signed between both parties.**

☐ Reduce payments in subsequent months. Describe: _____

☐ Recover through state/territory tax intercepts. Describe: _____

☐ Recover through other means. Describe: _____

☒ Establish a unit to investigate and collect improper payments and describe the composition of the unit below. Describe: **The Idaho Department of Health and Welfare maintains a unit for Welfare Fraud Investigations. Trained investigators actively pursue allegations of program abuse by clients and child care providers. Once their findings are complete, the Revenue Operations Unit at Idaho Department of Health and Welfare actively pursues the collection of various outstanding monies owed to the Department. They pursue the recovery of program benefit overpayments whether stemming from intentional program violations (IPV's) on part of IDHW clientele or from simple human error. Revenue Operations diligently pursue the capture of any monies receivable as negotiated through a repayment agreement or as awarded through fair hearing and legal proceedings, and then systematically process the receipt and distribution of those funds to ensure that they are deposited into the appropriate financial accounts.**

☐ Other. Describe: _____

8.1.6 What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to program violations? Check and describe all that apply:

- ☒ Disqualify the client. If checked, describe this process, including a description of the appeal process for clients who are disqualified. Describe: **INTENTIONAL PROGRAM VIOLATIONS (IPV).** An IPV is an intentionally false or misleading action or statement as identified below in Subsections 702.01 through 702.08 of this rule. An IPV is established when a family member or the child care provider admits the IPV in writing and waives the right to an administrative hearing, or when determined by an administrative hearing, a court decision, or through deferred adjudication. Deferred adjudication exists when the court defers a determination of guilt because the accused family member or child care provider meets the terms of a court order or an agreement with the prosecutor. (IDAPA: 16.06.12.702) **PENALTIES FOR AN IPV.** When the Department determines an IPV was committed, the party who committed the IPV loses eligibility for ICCP. If an individual has committed an IPV, the entire family is ineligible for child care benefits. If a child care provider has committed an IPV, the provider is ineligible to receive payments. The period of ineligibility for each offense, for both participants and providers, is as follows: 01. First Offense. Twelve (12) months, for the first IPV or fraud offense, or the length of time specified by the court. 02. Second Offense. Twenty-four (24) months for the second IPV or fraud offense, or the length of time specified by the court. 03. Third Offense. Permanent ineligibility for the third or subsequent IPV or fraud offense, or the length of time specified by the court. (IDAPA: 16.06.12.703) Clients have 30 days from the date of the decision to request a Fair Hearing. Fair Hearing Officers review and respond to all requests within 5 calendar days of the "Fair Hearing Requested" task being set. They communicate the status of reinstatement/continuance of benefits pending the hearing result to the customer within 5 calendar days of the "Fair Hearing Requested" task being set. Then work with the client to coordinate and manage all aspects of a fair hearing to completion. (Benefits Process Manual: "Fair Hearing Process")
- ☒ Disqualify the provider. If checked, describe this process, including a description of the appeal process for providers who are disqualified. Describe: **TERMINATION OF PROVIDER STATUS.** Under Section 56-209h, Idaho Code, the Department may terminate the provider agreement of, or otherwise deny provider status for a period of up to five (5) years from the date the Department's action becomes final to any individual or entity providing ICCP. (IDAPA 16.06.17.750). **PROVIDER NOTIFICATION,** When the Department determines actions defined in Sections 701 through 705, 750, and 751 of these rules are appropriate, it will send written notice of the decision to the provider or person. The notice will state the basis for the action, the length of the action, the effect of the action on that person's ability to provide services under state and federal programs, and the person's appeal rights. **NOTICE TO STATE LICENSING AUTHORITIES.** The Department will promptly notify all appropriate licensing authorities having responsibility for licensing of a Department action, and the facts and circumstances of that action. The Department may request certain actions be taken and that the Department be

informed of actions taken. A certified letter serves as written notice of the decision. A decision issued by the Department in the Division of Welfare program will be final and effective unless an individual or representative files a written notice of appeal within thirty (30) days from the date the decision was mailed. Appeals can be sent to: Idaho Department of Health and Welfare Administrative Procedures Section (APS) P.O. Box 83720, Boise, Idaho 83720-0036 APS@dhw.idaho.gov (Letter of termination) Fair Hearing Officers review and respond to all requests within 14 calendar days of receipt of the appeal. They communicate the status of reinstatement of the Provider Agreement pending the hearing result to the provider, then work with the provider to coordinate and manage all aspects of a fair hearing to completion. (Benefits Process Manual: "Fair Hearing Process").

- ☒ Prosecute criminally. Describe: Idaho would fully cooperate with law enforcement if an individual or provider was being prosecuted.
- ☐ Other. Describe:

Appendix A: Background Check Waiver Request Form

Lead Agencies may apply for a temporary waiver for certain background check requirements if milestone prerequisites have been fully implemented. These waivers **will** be considered “transitional and legislative waivers” to provide transitional relief from conflicting or duplicative requirements preventing implementation, or an extended period of time in order for the state/territory legislature to enact legislation to implement the provisions (98.19(b)(1)) These waivers are limited to a one-year period and may be extended for at most one additional year from the date of initial approval.

Approval of these waiver requests is subject to and contingent on OCC review and approval of responses in section 5 questions 5.4.1 – 5.4.4 to confirm that the milestones are met. If milestone prerequisites are not met, the waiver request will not be approved. Approved waivers would begin October 1, 2018 through September 30, 2019.

If approved, States and Territories will have the option to renew these waivers for one additional year as long as progress is demonstrated during the initial waiver period. Separate guidance will be issued later on the timeline and criteria for requesting the waiver renewal.

Overview of Background Check Implementation deadlines

Original deadline for implementation (658H(j)(1) of CCDBG Act):	September 30, 2017
Initial one-year extension deadline (658H(j)(2) of CCDBG Act):	September 30, 2018
One-year waiver deadline (45 CFR 98.19(b)(1)(i)):	September 30, 2019
Waiver deadline one-year renewal (45 CFR 98.19(b)(1)(ii)):	September 30, 2020

Waiver approval for new (prospective) staff, existing staff or staff hired provisionally until background checks are completed, are subject to and contingent upon the OCC review and approval of responses to 5.4.9 that demonstrate that the state/territory requires: (1) the provider to submit the background check request before the staff person begins working; and (2) pending the results of the background check, the staff person must be supervised at all times by an individual who has completed the background check.

To submit a background check waiver request, complete the form below.

Check and describe each background check provision for which the Lead Agency is requesting a time-limited waiver extension.

- ☐ **Appendix A.1:** In-state criminal registry or repository checks with fingerprint requirements for existing staff. (See related question at 5.4.1 (b).)
 - Describe the provision from which the state/territory seeks relief.
 - Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children.

- Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.
- ☐ **Appendix A.2:** In-state sex offender registry requirements for existing staff. (See related question at 5.4.2 (b).)
- Describe the provision from which the state/territory seeks relief. [\[redacted\]](#)
 - Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children. [\[redacted\]](#)
 - Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. [\[redacted\]](#)
- ☐ **Appendix A.3:** In-state child abuse and neglect registry requirements for existing staff. (See related question at 5.4.3 (b).)
- Describe the provision from which the state/territory seeks relief. [\[redacted\]](#)
 - Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children. [\[redacted\]](#)
 - Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. [\[redacted\]](#)
- ☐ **Appendix A.4:** National FBI fingerprint search requirements for existing staff. (See related question at 5.4.4 (b).)
- Describe the provision from which the state/territory seeks relief. [\[redacted\]](#)
 - Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children. [\[redacted\]](#)
 - Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. [\[redacted\]](#)
- ☐ **Appendix A.5:** National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) search requirements for new or prospective staff. (See related question at 5.4.5 (a).)
- Describe the provision from which the state/territory seeks relief. [\[redacted\]](#)
 - Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children. [\[redacted\]](#)
 - Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. [\[redacted\]](#)
- ☐ **Appendix A.6:** National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) search requirements for existing staff. (See related question at 5.4.5 (b).)
- Describe the provision from which the state/territory seeks relief. [\[redacted\]](#)

- Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children. [\[redacted\]](#)
 - Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. [\[redacted\]](#)
- ☐ **Appendix A.7:** Interstate criminal registry or repository check for new or prospective staff. (See related question at 5.4.6 (a).)
- Describe the provision from which the state/territory seeks relief. [\[redacted\]](#)
 - Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children. [\[redacted\]](#)
 - Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. [\[redacted\]](#)
- ☐ **Appendix A.8:** Interstate criminal registry or repository check for existing staff. (See related question at 5.4.6 (b).)
- Describe the provision from which the state/territory seeks relief. [\[redacted\]](#)
 - Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children. [\[redacted\]](#)
 - Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. [\[redacted\]](#)
- ☐ **Appendix A.9:** Interstate sex offender registry or repository check for new or prospective staff. (See related question at 5.4.7 (a).)
- Describe the provision from which the state/territory seeks relief. [\[redacted\]](#)
 - Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children. [\[redacted\]](#)
 - Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. [\[redacted\]](#)
- ☐ **Appendix A.10:** Interstate sex offender registry or repository check for existing staff. (See related question at 5.4.7 (b).)
- Describe the provision from which the state/territory seeks relief. [\[redacted\]](#)
 - Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children. [\[redacted\]](#)
 - Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. [\[redacted\]](#)
- ☐ **Appendix A.11:** Interstate child abuse and neglect registry check for new or prospective staff. (See related question at 5.4.8 (a).)

- Describe the provision from which the state/territory seeks relief.
 - Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children.
 - Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.
- ☐ **Appendix A.12:** Interstate child abuse and neglect registry check for existing staff. (See related question at 5.4.8 (b).)
- Describe the provision from which the state/territory seeks relief.
 - Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children.
 - Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.
- ☐ **Appendix A. 13:** New staff hired to work provisionally until background checks are completed. (See related question at 5.4.9.)
- Describe the provision from which the state/territory seeks relief.
 - Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children.
 - Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.